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ABSTRACT

Between 1999 and 2000, 7 British Columbia communities participated as demonstration sites for suicide prevention initiatives. The goal was to identify planning and communication requirements, local leadership characteristics, community level partnerships, and infrastructure needs that best facilitate a comprehensive and community-wide approach to youth suicide prevention. this project also sought to help communities begin the process of applying best practices and to undertake research that could improve the understanding of what worked in their community. The best practice strategies included skill building, peer helping, youth participation, suicide awareness education, school and community gatekeeper training, system wide protocols, and community development. One of the most important findings within the communities was the power of simply bringing youth suicide into the open as a topic appropriate for public discussion. "Permission" to discuss suicide can reduce tensions, facilitate communication, and help young people get the help they need. The report concludes with a discussion of the lessons learned from the project, and points for consideration in implementing best practice strategies and in developing the next phase of this project. (JDM)

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EVALUATION REPORT

YOUTH SUICIDE PREVENTION IN BRITISH COLUMBIA:
Putting Best Practices into Action

Mheccu Mental Health Evaluation & Community Consultation Unit

Suicide Prevention Information & Resource Centre (SPIRC)

Report prepared by Jerry Hinbest, under contract to SPIRC at MHECCU, UBC
as part of the "*Putting Best Practices Into Action*" Project,
funded by the Ministry for Children and Families

April 2001

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EXECUTIVE SUMMARY

Between May 1999 and June 2000, seven British Columbia communities — Powell River, Prince Rupert, Quesnel, Revelstoke, Richmond, the Stikine Region and Williams Lake — participated as demonstration sites for an innovative and precedent setting suicide prevention initiative. The *"Putting Best Practices into Action"* project was funded by the Ministry for Children and Families (MCF) and coordinated by the Suicide Prevention Information and Resource Centre (SPIRC), of the Mental Health Evaluation and Community Consultation Unit (MHECCU), in the Department of Psychiatry at the University of British Columbia (UBC). This report summarizes project activities, findings and recommendations for future action.

The project's broad goal was to identify planning and communication requirements, local leadership characteristics, community-level partnerships, and infrastructure needs that best facilitate a comprehensive and community-wide approach to youth suicide prevention. It built upon work published by SPIRC in "the manual" — *Before the Fact Interventions: A Manual of Best Practices in Youth Suicide Prevention* (1998). The project also sought to help BC communities to begin the process of applying the best practices described in the manual, and to undertake original research that could improve our understanding of what works, and in which community contexts.

Each of the seven participating communities implemented at least four of the fifteen best practices described in the manual. In total, eight of the best practices were addressed by project sites, with three done by all seven sites (*Suicide Awareness Education*, *Peer Helping*, and *Youth Participation*), and a fourth (*Community Gatekeeper Training*) implemented by all but one community. Over forty diverse implementations of best practice strategies were implemented by demonstration site communities. Close to 6,000 youths were directly impacted by the initiative, and at least that many were affected by it indirectly. The other best practices addressed by project sites were *School Gatekeeper Training*, *Generic Skill-Building*, *System-Wide Protocols*, and *Community Development*.

Funding awards for the projects ranged from $10,500 to $40,000 over a one-year implementation schedule. Each participating community was required to generate matching funds (or in-kind contributions) to a level of 50% of funding received from SPIRC, and most exceeded the requirement.

The research component of the initiative used a participatory, cluster evaluation approach, and emphasized formative evaluation goals. Improving best practice strategy implementation and adapting project activities over the course of the implementation period were key aspects of the project's design and rationale. The project used a wide range of data collection methods, reflecting the diversity of the implementation. They included structured interview schedules, questionnaires, focus group sessions, and in-depth informant interviews, conducted on site by project leads and by the evaluator, and by telephone as follow-up to the project. Over 60 interviews were conducted with key informants across the province.

The multiple-strategy approach promoted in the manual was applied in each project. Some best practices naturally fit well together. Thus, for example it was readily apparent that youth participation would

enhance a peer helping or suicide awareness initiative. For others, the projects provided the opportunity to better understand how seemingly diverse activities could complement one another and reinforce their implementation, cost-effectiveness and sustainability. For example, the community development work for gatekeeper training and suicide awareness education linked well with the efforts in several communities to develop or update system-wide protocols.

Taken as a whole and individually, the seven community implementations offered many learning opportunities. While only one community implemented every activity it set out to undertake at the start of the initiative, all projects ended up doing most of the activities originally envisioned, plus some additional activities that grew out of their collaborative processes, opportunities that arose as part of the implementation, and ongoing reflection on the goals of their endeavours. Every community completed their projects with plans for future efforts, and a commitment to keeping in touch and building on cooperative project activities.

Key activities for each of the seven communities are summarized below, followed by major findings and learning relevant to applying best practices by local communities, MCF and SPIRC.

POWELL RIVER: The key activity in this community was the adaptation of its existing 'Youth Voices' peer helping program by adding content and training related to suicide prevention. Other major activities included developing a system-wide protocol, and introducing school and community gatekeeper training in several formats.

PRINCE RUPERT: Youth involved in this project conducted suicide awareness education sessions in the schools, organized a youth forum, and undertook a variety of activities related to broadening community understanding about the issue of youth suicide, and reaching out to outlying First Nations villages. Progress was made in connecting with the villages, and building towards stronger involvement in the schools in the following year.

QUESNEL: In perhaps no other community in British Columbia has there been a comparable level of saturation of community agency staff who have taken gatekeeper training. The project built on this base, and worked to integrate efforts with further suicide awareness education and development of a system-wide protocol.

REVELSTOKE: This project had a school-based prevention worker introduce a peer helping program in the high school. It had strong youth participation, and linked to gatekeeper training, generic skill-building and suicide awareness education efforts. Peer helpers undertook intensive two-day training twice in the school year, and contributed to a variety of school activities.

RICHMOND: The 'Stepping Out' program focused on emotional resiliency among grade six and seven students in two schools. This seven-week program depended on youth volunteers who helped design and deliver 40 minute sessions dealing with such generic skill-building topics as problem solving, diversity, assertiveness, coping with bullying and stress, and friendship.

STIKINE REGION: The key activity in this project was an innovative community peer helper program that used a crisis line format to connect those in need with peer support. The approach was complemented by a variety of culturally sensitive gatekeeper training, suicide awareness education, and community development activities.

WILLIAMS LAKE: This community set an ambitious agenda that covered a wide range of activities including suicide awareness education, school and community gatekeeper training, system-wide protocol development, and peer helping. Progress was made on all fronts, however the project's sustainability will depend upon how the ongoing community development process builds links among diverse activities and prioritizes them for volunteers.

KEY LEARNING

The report describes key findings and learning related to each of the best practice strategies addressed by the project, as well as for selected process issues and questions. Below is a sampling of the findings and issues discussed.

Best Practice Strategies

GENERIC SKILL BUILDING: Practical, experiential learning and role-playing are necessary aspects of skill building. Addressing resiliency is appropriate for a variety of age levels, and fits well with a wide range of other prevention initiatives.

PEER HELPING: These programs help both the peer helpers and those with whom they interact. Suicide prevention can work as a part of a more generic peer helping program, or as the main focus of one. Useful strategies employed by the projects included training in weekend retreats and nominating peer helpers from across social groupings.

YOUTH PARTICIPATION: Youth are capable of and interested in taking on diverse roles critical to the success of suicide prevention efforts. Older students involved in delivering generic skill-building or peer helping programs provide important energy, hands-on interaction, and legitimacy for the ideas discussed. Such participation for previous participants reinforces learning, and provides practical application of skills.

SUICIDE AWARENESS EDUCATION: This can be a two-way, interactive process that contributes to broader community development efforts, and supports the implementation of gatekeeper training, protocol development, and basic community awareness and planning.

SCHOOL & COMMUNITY GATEKEEPER TRAINING: Even in communities with large numbers of past participants in gatekeeper training, demand remained high. Participants expressed satisfaction with the training received from both 'Living Works' and 'Ask-Assess-Act' programs, and clearly valued experiential learning and role-plays as part of the training process.

SYSTEM-WIDE PROTOCOLS: Developing protocols takes time, and a great deal of ongoing leadership, interaction, negotiation, and relationship building. Using examples, case studies and after-the-fact reviews of referrals are important parts of the development process. There are different types of protocol, and they reflect specific community concerns and capabilities. Their success depends on linking appropriately with other organization protocols through training and ongoing maintenance.

COMMUNITY DEVELOPMENT: A high level of turnover among project leadership, staff and volunteers involved with the projects highlighted the need to build in redundancy and backups among committee members. Training in community development processes would be valuable for participants in future projects. Community development takes time, and participants were challenged to complete the activities they had proposed for their projects.

Process Issues & Questions

Conditions for Supporting Successful Implementation: Communities need adequate time for development and implementation, some resources for hiring appropriate help for specific tasks as needed, partnerships with those who are central to implementation of the activities, buy-in so that the partnerships remain meaningful and active, and leadership capable of providing vision and continuity to community efforts.

Planning Approaches: Some of the best learning in the projects grew out taking advantage of unanticipated opportunities, showing the value of being able to balance planning and flexibility in implementation. Maintaining ongoing local prevention committees with appropriate membership, and linking with other prevention efforts were key aspects of project success.

Leadership Characteristics: The projects used a variety of approaches to getting project activities done — paid coordinators (both full and part-time), volunteers, delegation to committees, and working responsibilities into ongoing work duties. All met with mixed success, as volunteers 'worked of the sides of their desks' and coordinators struggled to define their roles vis-à-vis steering committees. Continuity of project leadership and the vision communicated by that leadership proved to play a major role in the success of all project implementations.

Leveraging Resources: External funding for the projects provided local committees with legitimacy and reinforced their efforts at local as well as external fundraising. Most communities took advantage of emerging opportunities to save resources and build for future efforts. Participating youth became a strong local resource.

Key Partnerships: Not surprisingly, schools and school districts were identified at the top of the list of key partners among the projects, followed closely by local hospitals and public health units, MCF representatives, and local agencies that deal with youth or mental health issues. Linking to other prevention efforts is essential where ever possible. Other communities can often offer innovative examples and insights concerning implementation challenges and solutions.

Multiple Strategies: The multiple-strategy approach clearly benefited communities, but also provided some of their greatest challenges. The timing of activities — both within a one-year implementation and as a multi-faceted endeavour, strained local community capabilities. Future efforts need to use a phased approach to implementing activities in order to avoid burnout, and use successive strategies as building blocks for an overall long-term strategy.

Increasing Visibility: Project participants became quite ingenious in finding new ways to develop and maintain the public visibility of their projects: newsletters, web-sites, and the media were the most common means. Yet every project found a variety of other activities that proved valuable — making contacts through fundraising, holding regular public events such as forums, public training and information sessions, and conducting community and agency surveys to connect with appropriate local stakeholders while collecting needed information.

Sustainability: The participating communities suggested and have tried to implement a variety of strategies building towards long-term sustainability of their efforts. These included developing local

leadership through strong and stable committees, linking to broader prevention efforts within the community, tapping local resources for ongoing funding of activities — including finding in-kind donations, keeping projects visible, using a multiple strategy approach that encourages the creation and maintenance of maximum linkages with other community players, and building suicide prevention into broader community development initiatives.

CONCLUSIONS

The challenges faced and addressed by the seven participating communities were part of the rich tapestry of best practice implementation that the initiative was designed to develop and document. As such, even those planned activities that did not get implemented as part of the projects contributed to the local and community level learning that took place. The projects gained a great deal of hard-won learning through inspired effort by many people.

In summarizing the learning gained, several broad observations stand out for emphasis. First, a relatively small seed investment can have a very strong impact in promoting a comprehensive and meaningful group of community-level suicide prevention activities. These resources legitimate local activities, and are multiplied by local investment of in-kind donations.

A second observation is that the one-year time frame for the phase one projects was too short. The time was too short to complete the implementation of many activities; too short to allow the quality and thoroughness of development that communities wanted; too short to fit well with organizational planning cycles, and too short to implement evaluation efforts focused on effectiveness impacts.

A third observation concerns project leadership — there was a great deal of turnover among project chairs, committee members, and coordinators. This turnover contributed to burnout of remaining participants and challenged continuity. While strong leadership and a clear vision can be powerful inducements to collective action and generating new initiatives, long-term sustainability of suicide prevention activities would appear to be better served by developing stable committees with wide representation and realistic planning goals.

Fourth, in most communities the participants finished their projects with a longer list of intended activities than when they started. As each part of their community puzzle was put into place, the picture grew larger, and the number of pieces appeared to increase. A strong, if daunting, impact of participation for each community was that their understanding of the range of possible and necessary prevention activities has grown, and now encompasses activities far beyond the scope of their initial goals.

A fifth observation is that post-training surveys of peer helpers, those taking gatekeeper training, and others involved with the projects consistently showed high levels of satisfaction with the participation in suicide prevention activities. Most also indicated clear increases in knowledge and appropriate changes in attitudes towards helping those at risk of suicide.

A key element of successful suicide prevention programs discussed in the literature is the need for skill development and practice related to risk identification among peer helpers and gatekeepers. The data collected through the projects agreed with this — the hands-on and practical side of the training was rated highly immediately after training and also after follow-up.

A seventh observation was that the multiple best practice strategy approach was both embraced and the subject of concern by those involved with the projects. Most tried to take on too many activities, but still found that working on several fronts at the same time provided certain efficiencies. Of more importance, activities served to support one another in many ways that were hard to predict in advance of the broader implementation.

The projects demonstrated the value of linking suicide prevention efforts with other concurrent community development and prevention activities. Not only can such activities be more efficiently implemented in the short-term, they also have a higher probability of long-term sustainability.

Finally, and perhaps most importantly, several communities noted the power of simply bringing youth suicide into the open as a topic appropriate for public discussion. Giving people 'permission' to discuss suicide — something that virtually any of the best practice strategies can contribute to — can reduce tensions, facilitate communication, and help young people get the help they need. The process of facing suicide for a community thus appears to be very similar to what we know works for an individual. Asking the question and facing suicide directly does not increase the likelihood of its incidence — it decreases it.

The report concludes with a comprehensive discussion of future options and priorities for addressing youth suicide prevention in British Columbia. Twenty key ideas for consideration are offered related to the mandates of the Ministry for Children and Families and the Suicide Prevention Information and Resource Centre.

1. Overview

This report presents findings and recommendations growing out of an innovative effort aimed at promoting local suicide prevention activities among seven British Columbia communities between May 1999 and June 2000. The seven communities — Powell River, Prince Rupert, Quesnel, Revelstoke, Richmond, the Stikine Region and Williams Lake — participated as demonstration sites for the *"Putting Best Practices into Action"* initiative. The project was funded by the Ministry for Children and Families (MCF) and coordinated by the Suicide Prevention Information and Resource Centre (SPIRC), of the Mental Health Evaluation and Community Consultation Unit (MHECCU), in the Department of Psychiatry at the University of British Columbia (UBC). The evaluation of phase one of the initiative has focused on formative issues — emphasizing learning that can assist SPIRC and MCF in promoting and supporting long-term effective community efforts to prevent youth suicides and suicide attempts.

BACKGROUND

The *"Putting Best Practices into Action"* project addressed the complex and multi-determined problem of youth suicide. The project's aim was "to identify those community-level partnerships, infrastructure needs, planning and communication requirements, and local leadership characteristics that best facilitate a comprehensive and community-wide approach to youth suicide prevention."[1]

Demonstration projects were established in seven diverse communities across British Columbia, each implementing different strategies of the approach suggested in "*Before the Fact Interventions: A Manual of Best Practices in Youth Suicide Prevention*," published[2] by the Suicide Prevention Information & Resource Centre (SPIRC) in 1998. The manual identifies fifteen specific "before the fact" approaches to working with individuals, family, schools and communities to reduce the risk of youth suicide. The suicide prevention strategies were designed for healthy populations or groups at early risk, where a specific risk for suicide has not yet been identified.

Communities were selected for the project based on their ability to serve as demonstration sites for the fifteen specific strategies. The focus for selection of sites was on communities that:

- offered multiple-strategy approaches;
- represented broad community coalitions that could maximize the likelihood of success and sustainability;
- offered good opportunities to compare specific strategies across sites with differing implementations and/or different contexts;
- maximized the types of intervention that would be addressed;
- represented the diversity of BC communities; and
- offered the best opportunities for learning about what works in youth suicide prevention, and for sharing knowledge with other BC communities.

Project Goal

The goal of the *"Putting Best Practices into Action"* project was twofold: 1) to begin the

[1] *Call for Letters of Intent / Proposals*. SPIRC, 1998, p.1.

[2] *Before the Fact Interventions: A Manual of Best Practices in Youth Suicide Prevention*. Jennifer White & Nadine Jodoin, SPIRC, 1998. Hereafter referred to as 'the manual.'

process of implementing the best practices described in the manual in BC communities, and 2) to undertake original research that could increase our understanding of what works, and in which situations.

The fifteen specific strategies identified in the best practices manual were developed based on existing evidence of "what works." Yet there is a significant need for comprehensive evaluative information about how strategies and interventions are implemented, as well as the effectiveness of activities related to a variety of short- and medium-term goals. The fifteen strategies are strongly related, and overlap in significant areas; some are dependent on others for their implementation. The manual had been developed as a resource based on a conference and public consultation process that had begun several years earlier. An additional goal of this evaluation has been to explore with communities the value of the manual as a community resource, and to get feedback concerning its strengths and areas in need of re-working or improvement. The communities taking part in the *"Putting Best Practices into Action"* project implemented eight of the fifteen best practice strategies, with two other strategies anticipated but not implemented. The individual best practice strategies will be described in more detail later in this report.

Formative Evaluation

The research component of this project was developed with formative evaluation goals at the forefront, focusing strongly on documenting the activities being implemented, developing information that could improve the implementation of strategies over the course of the project and in future efforts at both local and provincial levels. Improving the project and adapting project activities over the course of the implementation was a key part of the project's purpose — the project team did not simply want to introduce static activities and then check to see whether they made a difference. We strove to ensure that the best practices were given every opportunity to succeed, and that the implementation of processes could be adapted as needed to reflect the unique situations of specific communities. We also wanted to maximize opportunities to learn about which activities work or do not work, and why.

Summative Evaluation

Impact and effectiveness issues have been addressed in the evaluation, primarily by examining interim measures related to establishing the conditions of success for the prevention of youth suicide. Follow-up information from individuals taking part in much of the training and other activities sponsored through the project is still being collected, and additional follow-up will be done over the course of the next year. Further, it was not realistic to introduce concrete final outcome measures such as reduction in the number of youth suicides in a project such as this. The demonstration project was short-term with a limited budget, and as such it would be extremely difficult to attribute changes, either positive or negative, exclusively to project activities. On the other hand, on a community-specific basis, anecdotal information did speak to the issue of impacts on the number of suicides and suicidal behaviours.

METHODS

The evaluation approach used in the project reflects the nature of the interventions introduced. The strategies were highly dependent on how the problem of youth suicide manifested in specific communities — on the total community context of the

project. A wide range of factors contributed to the selection of a specific constellation of activities, and the recruitment of appropriate community members to participate. The factors included:

- community preparedness for dealing with crises and their aftermath
- broad awareness within the community of suicide and suicide prevention issues and protocols
- the size, mandate and scope of community agencies and voluntary organizations
- the availability of other programming or community activities that could be drawn upon as resources to aid in project implementation, and
- the scope and recent history of the problem of youth suicide in the specific community in question

Participatory Research Approach

The multi-site, distributed context of the implementation, and the necessary reliance on broad and shifting coalitions of community stakeholders (many of whom were volunteers) to undertake key implementation and evaluation activities meant that we needed to use a consensus-based and participatory approach to evaluation. The range of intervention types was as broad as the number of communities involved, and even for quite similar types of intervention, the different communities had markedly contrasting activities and modes of implementation. The number of specific strategies implemented in each community ranged from a minimum of five to a maximum of seven — thus there were in effect over forty distinct strategies to try and monitor over the course of the project.

Specific strategies — such as suicide awareness education programs — often were implemented through several concurrent community activities such as public information sessions, presentations, and development of resource materials such as brochures and information cards for distribution. Without significant local input and assistance to the research component of the project, the sheer complexity of the implementation would have made a more centralized research endeavour extremely difficult to coordinate, and the cost prohibitive.

Cluster Evaluation

The particular form of participatory research used was "cluster evaluation," a model that has been developed and refined by the W.K. Kellogg Foundation. Cluster evaluation assesses the progress, outcomes and impacts of broad programming initiatives that have varied implementations in different community sites. It is an approach that recognizes how communities differ in their needs and capabilities (including their ability to contribute to evaluation efforts), and it can provide a strong framework for examining and contrasting diverse project implementations that may have very dissimilar objectives and activities. Cluster evaluations can typically help to:

- Assess the capacity of projects to achieve desired results,
- Identify situational factors and variations in strategy that enhance or decrease the ability to achieve desired outcomes,
- Describe the status of progress towards desired outcomes, and the likelihood of success,
- Assess the impacts of groups of strategies, including intended and unintended outcomes, and
- Contribute to learning about complex and diverse implementations.

The goal of cluster evaluation is primarily organizational learning; it is stakeholder and practitioner driven, and it depends on external evaluators not as independent arbiters of program success, but as coaches and facilitators who bring methodological and conceptual tools to the evaluation. In the context of the *"Putting Best Practices into Action"* project, the external evaluator was heavily involved in facilitating the implementation of project activities. This included:

- conducting workshops that dealt with defining project activities, dealing with implementation challenges, and evaluating the projects
- developing a web-site for information sharing relevant to project implementation and evaluation activities
- contributing to ongoing discussions over the course of the project's implementation stage, and at times playing a liaison role between the project communities and SPIRC.

The evaluator made site visits to each of the communities, using the opportunities to discuss implementation and evaluation activities, and to conduct interviews relevant to evaluation issues or of import to the project as a whole. Contribution to evaluation efforts included reviewing (most) data collection instruments, collecting original data through interviews and group discussions, and assisting with data-entry and analysis.

Data Collection

The evaluation of the *"Putting Best Practices Into Action"* project employed a wide range of data collection methods, reflecting the diversity of the implementation context. Questionnaires, interview schedules and other data collection tools were developed in a collaborative process, and where possible and feasible, instruments were shared among sites so that comparisons between sites would be facilitated. There was a considerable range in the sophistication of the evaluation data collection methods employed by different sites. Some communities used pre- and post-test instruments and scales to examine the impacts of interventions (one community introduced a comparison group design), and a few relied almost exclusively on anecdotal and qualitative approaches. In part this reflects the short duration of the implementation in the project sites, with some types of strategy requiring longer-term measures and data collection efforts that may be part of the second phase effort.

In addition to the data collection done on-site and by local demonstration site communities, follow-up interviews were conducted with over forty individuals. Those interviewed included project coordinators and steering committee members (most project leads were interviewed several times), project participants (members of organizations involved in or affected by the projects), and youth taking part in project activities.

Group discussions were held on-site in all participating communities with local steering and implementation committees, and in several communities with youth volunteers and youth participants.

Approximately twenty follow-up interviews were also conducted with representatives of communities that had submitted proposals to be part of the demonstration project but had been turned down for funding. More detail about specific data collection efforts will be provided with the results as they are presented in the sections that follow.

REPORT FORMAT

How communities chose to implement best practices was a key consideration for the research on 'what works.' Detail about the seven communities involved in the *"Putting Best Practices Into Action"* project is essential to understanding what was done with the projects, and what we have been able to learn from them.

- Section Two of the report provides profiles of each of the seven communities, outlining some background about the community, the activities that were implemented, and the lessons learned by community members.
- Section Three of the report examines findings based on the best practices strategies used in the seven communities, contrasting different types of implementation, and reflecting on what we have learned about the strategies themselves.
- Section Four addresses specific process questions posed at the start of the project relating to how best to support and organize prevention efforts in local communities.
- Section Five pulls together lessons learned through the seven projects and offers recommendations for future efforts.

2. Project Profiles

Project Selection

In the fall of 1998 twenty-nine communities responded to a Request for Proposals (RFP) released by SPIRC by submitting letters of intent to participate in the project. A dozen were invited to prepare full proposals. Eleven proposals were received and seven projects funded.

Project selection was completed in February of 1999, with the intention that project start up would coincide with the new fiscal year. Administrative delays kept the projects from obtaining funding and undertaking preparatory work (such as advertising for and hiring coordinators), until early May. Most project end dates were in either May or June of 2000, although several projects asked for and received permission to carry over remaining funds for some additional workshops and activities into the fall.

Funding awards for the projects ranged from $10,500 to $40,000, over a one-year implementation schedule. The original RFP indicated implementation plans of up to two years duration would be considered, however none of the selected projects chose that option. Each project site was required to generate matching funds (or in-kind contributions) to a level of 50% of funding received from SPIRC, and most generated considerably more than the minimum expected.

Implementation

Four of the seven projects hired a coordinator to undertake the majority of project activities. Coordinators were typically employed by a designated agency (which held the project funds), but worked with both agency staff and a project steering committee. In most cases, the project steering committee was in place prior to the start of the project, and applying the best practices became part of the total range of their mandate. In most cases the coordinator became the lead contact with SPIRC and the evaluator.

Workshops

Early on in the implementation process, a one-day workshop was held in Vancouver to which one representative from each of the projects was invited. This workshop covered a variety of topics relating to the project — expectations, background on evaluation and the 'research' side of the projects, and offered an opportunity for people from the seven demonstration sites to hear from one another and learn about how their projects fit into the broader endeavour. It became clear in the workshop that one day was too short a time for the work that was needed, and that what was initially considered to be an ancillary benefit of attending — the interaction among demonstration site community representatives — was perhaps the most beneficial aspect of the workshop.

In view of the perceived value of the workshop to those attending, a second, two-day workshop was held in the fall of 1999, and followed up with another in April of 2000. While the workshops were generally considered to be useful by those attending, they provided the evaluator and SPIRC with a very necessary opportunity to learn more about the actual implementation challenges and successes experienced by the projects. Regular conference calls were used to keep in touch with the sites, and a web-site put in place to share information. Yet both methods were less effective than the face-to-face interaction that was so informative in

the workshop sessions. One challenge that became clear in the workshops was that turnover among project staff and steering committee representatives was making continuity difficult to maintain — even in a one-year project. Only one of the seven projects had the same person attend all three workshops. And every project had turnover in either staff (coordinators), steering committee members or project leadership.

In addition to the workshop sessions and conference calls, the evaluator made site visits to all sites between December 1999 and March 2000. These visits were used to:

- discuss project activities in more detail with coordinators, steering and working committees
- conduct on-site interviews
- meet with project participants (including youths when possible), and
- provide assistance in data collection and planning activities.

Table One below shows the best practice strategies proposed and implemented by each of the seven demonstration site communities. Of the fifteen best practice strategies described in detail in the manual, ten were proposed as part of the projects

TABLE ONE: BEST PRACTICE STRATEGIES PLANNED AND IMPLEMENTED

	BEST PRACTICES	COMMUNITY						
		Powell River	Prince Rupert	Quesnel	Revelstoke	Richmond	Stikine Region	Williams Lake
YOUTH / FAMILY	- generic skill-building	✓	✗		✓✗	✓	✓	
	- suicide awareness education	✓	✓	✓	✓	✓	✓	✓
	- family support					✗		
	- support groups for youth		✗					
	- *screening*							
SCHOOL	- school gatekeeper training	✓			✓	✗	✓	✓✗
	- peer helping	✓	✓✗	✓✗	✓	✓	✓✗	✓✗
	- *school policy*							
	- *school climate*							
COMMUNITY	- community gatekeeper training	✓	✗	✓	✓	✓	✓	✓✗
	- *means restriction*							
	- *media education*							
	- youth participation	✓	✓✗	✓✗	✓	✓	✓✗	✓
	- system-wide protocols	✓		✓✗				✓✗
	- community development		✓✗			✓	✓✗	✓

LEGEND: ✓ Implemented as part of project ✗ Intended as part of project but not implemented ✓✗ Partially implemented as part of the project

for the seven participating communities. Of the ten, eight were implemented systematically by various projects. Only one project actually implemented all of the best practice elements described in their proposal.

There were four best practice strategies that all seven communities intended to include in their projects, although not all were able to implement each activity. These four were Suicide Awareness Education, Peer Helping, Community Gatekeeper Training, and Youth Participation (the latter was a requirement of all projects as outlined in the original Call for Proposals). Each project included at least one strategy targeted to youth or family, school, and community, and each project included strategies addressing both protective factors and those aimed at early intervention for those at early risk.

Earlier it was noted that some strategies could be implemented by means of several different activities in a community. Similarly, one activity could involve several strategies in operation at one time, such as a Peer Helping program that uses youth participants for its implementation, and which focuses on generic skill building or 'asset building.' These overlaps were both common and encouraged, and the examples they provide have contributed greatly to increasing our understanding about how strategies interact and support one another.

TABLE TWO: CONTINUUM OF SUICIDE PREVENTION ACTIVITIES

	BEFORE-THE-FACT		⇨	AFTER-THE-FACT
Primary target group	Populations & groups	Groups at early risk	Individuals at identifiable risk	Individuals at high risk
Suicide risk level	None	Low risk	Medium risk	High risk
Scope of intervention	Broad focus on risk and protective factors		Narrow focus on preventing imminent self harm or death	
Type of intervention	Mental health promotion	Early intervention	Treatment	Crisis intervention
Key factors	Protective factors	Predisposing and contributing factors		Precipitating factors
Best practice strategies addressed by the project sites	• Generic skill building • Peer helping • Youth participation • Community development	• Suicide awareness education • School / community gatekeeper training • System-wide protocols		
Other best practice strategies	• Family support • School climate • Screening	• Support groups for youth • School policy • Means restriction • Media education	• Individual treatment / assessment • Family therapy • Cinical training • Case management	• 24 hour crisis response services • Hospital in-patient programs • Psychopharmaco-logical interventions
Ultimate outcome	REDUCED SUICIDES AND SUICIDAL BEHAVIOURS			

Source: Adapted with permission from "Before-the-Fact" Interventions: A Manual of Best Practices in Youth Suicide Prevention," p. 26. by Jennifer White and Nadine Jodoin.

Table Two above replicates and adapts a key table from the manual, and puts the best practices into context on a continuum from *before-the-fact* to *after-the-fact* interventions. The former are targeted at broad populations and groups, or those at early risk, while the latter are focused on

those already identified as at-risk. The continuum is reflected in several themes — the types of intervention (health promotion to crisis intervention) and level of risk (not at risk to high risk).

The balance of this section examines the specific best practice strategies implemented in each of the project sites, and provides descriptive detail that will inform the analysis that follows. Summary 'Focus' excerpts that provide a brief description of the eight best practice strategies implemented across the seven demonstration sites have been included in this section. The summary information has been adapted from more detailed descriptions in the manual.

POWELL RIVER

Powell River is a corporate district of four small communities with an approximate population of 21,000. It is located on the West Coast approximately 150 km north of Vancouver and accessible by road via two ferries (about a 5-hour journey). One reserve, Sliammon, is located north of Powell River, and has approximately 850 band members.

Powell River began as a company town, and the pulp and paper mill continues to be the major employer. Due to its relative isolation, service agencies and professionals in the community have developed strong networks for formal and informal discussion. The proposal to participate in the best practices project was a collaborative effort by members of the Building Blocks initiative, with leadership coming from School District #47.

Powell River was the only project that implemented all of the best practice strategies included in its initial proposal. But like all of the other projects, Powell River experienced unanticipated change in implementing the project activities. The individual who had taken the lead role in developing the proposal was transferred to a new position, and another committee member took over liaison responsibilities.

What Was Implemented

The best practice strategies and activities implemented in Powell River included:

- *Suicide Awareness Education:* A Teen Information Card was prepared and approximately 2,000 distributed.
- *School & Community Gatekeeper Training:* A one-day "Ask-Assess-Act" gatekeeper training session was offered in February 2000. Several communities participating as demonstration sites intended to provide the "Ask-Assess-Act" training as part of their projects, but only Powell River was able to do so within the project time span due to travel restrictions introduced by the Ministry for Children and Families. The one-day session was attended by teachers and by people from several community organizations, including one RCMP officer. Forty-five people also attended a two-day "Living Works" training session in February. Those attending included health services and community agency staff, alcohol & drug counsellors, school counsellors, foster parents, child & youth care workers, mental health clinicians, private counsellors, and two high school students.
- *System-Wide Protocol:* The Adolescent Building Blocks Committee developed an initial protocol for Youth & Family Services, MCF, Adult Mental Health Services and the hospital. A more general protocol has been developed, refined, and signed off by community organizations in the fall of 2000.
- *Peer Helping / Youth Participation / Generic Skill Building:* An existing program — "Youth Voices" — was augmented with information relevant to suicide prevention. The program normally provides training for peer facilitators in presentation and facilitation skills (through the Justice Institute) and knowledge related to substance abuse, anti-violence and human sexuality. The youth become "informal" role models. The content of the program was augmented to include suicide risk information and generic skills such as social skills, problem solving and stress management. The training was also extended beyond high

school students to include out-of-school and college teens in order to provide broader community coverage. The 20 youth taking part in the Youth Voices program facilitated numerous activities at all school levels, and made dramatic presentations to middle school and adult groups such as the School District Professional Development Day and a Community Case Management Workshop. Several Youth Voices members attended meetings of the Adolescent Building Blocks Committee.

Challenges Faced

As one of three projects without a paid coordinator, the Powell River project experienced many of the implementation activities as something that was done 'off the sides of their desks' — a phrase that was used by individuals from most sites, and particularly by steering committee members. The time-pressure experienced by steering committee members (and coordinators in other groups) was exacerbated by the late start to the projects due to administrative delays in announcing funding. This was particularly difficult for four of the projects that were depending on establishing strong links with schools and school boards. In most cases it was difficult to have much developmental work go on with the schools over the summer, and the late delay meant that much of the developmental work had to wait until September to begin.

The Powell River project also experienced a common challenge faced by all of the sites — how to keep youth interested and committed to the project and to providing long term input to youth suicide prevention activities. Providing 'food and t-shirts' certainly helps, however most projects found that trying to find appropriate opportunities to participate was a key aspect of maintaining successful youth involvement.

FOCUS: *GATEKEEPER TRAINING*

Gatekeepers are those individuals who typically come into contact with youth as part of their regular or daily routine in their professional roles or volunteer activities. By virtue of their existing relationships with young people, gatekeepers are ideal candidates as "early detectors" of those who are at potential risk of suicide. Gatekeeper training is an educational and skill-building effort that can improve gatekeepers' knowledge and competency in recognizing potential crisis and acting appropriately in securing needed help.

Gatekeeper training aims to:

- increase attitudes favourable to intervention
- increase knowledge about depression and the problem of youth suicide
- improve competency in the identification and crisis management of potentially suicidal adolescents
- increase awareness of helping resources

School Gatekeeper Training is typically provided within educational settings where school personnel work, and to all adults who work within the secondary and middle school systems.

Community Gatekeeper Training is typically provided within local communities, and is similar to school gatekeeper training in most content. However, community gatekeepers may or may not have a mandate to provide clinical assessment or crisis intervention, and are generally not in a position to provide supportive counselling to young people in crisis. Thus the training emphasizes early identification and referral to appropriate helping resources.

A particular challenge for the Powell River project was coordinating the development of a System-Wide Protocol. Their challenge reflected several aspects of the process of

developing a protocol, and was mirrored in several other communities. An initial challenge was simply bringing all of the community players together to discuss the protocol — including finding common dates, negotiating who would be taking part, and setting a realistic agenda and timeline. A further aspect of this challenge was the dynamic nature of many organizations — representatives changed, and so did organizational policies and priorities. An example of this was the changing relationship between Adult Mental Health services and the hospital; as they develop a more integrated structure, it impacts protocol development for children and youth. Ongoing efforts to redefine Mental Health services for youth through MCF, in contrast to adult services provided through the health region have led to similar challenges.

A further challenge was the amount of time and effort necessary to develop a mutual understanding of various agency mandates and systems, which was considered necessary in order to adequately coordinate different approaches. The challenge of developing the protocol included recognizing that it needed to be easily communicated across and within agencies, and used consistently by staff and volunteers on rotating shifts and changing assignments.

Key Lessons Learned

The Powell River project received an overwhelming response to the gatekeeper training. The response extended beyond the large number of people attending the two planned events, although that was significant in itself. The gatekeeper training provided opportunities for individuals from schools and the broader community to develop skills, communicate, develop a shared language and knowledge base, and establish actual and potential working relationships. In turn, this has facilitated the development work and adoption strategy for the system-wide protocol.

In developing a prevention protocol, the committee came to understand the need for a suicide postvention protocol, and it's potential long-term role in prevention.

Other learning included:

- The youth information cards were well received, but it became clear that they need to be distributed directly to youth. Otherwise they get put into desks and drawers and 'forgotten'.
- Participating in a demonstration project can bring people together to make things happen, but it also involves trying to stick to unrealistic timelines that don't necessarily fit with community priorities or capabilities.
- Similarly, participation in evaluation efforts needs to be resourced adequately — both in financial resources and having appropriate time built into the project planning to undertake the activities. This is particularly challenging for projects without a coordinator or someone with an 'official' designation of responsibilities and mandate for the work. Working 'off the sides of their desks' contributes to having the implementation compete with evaluation activities for priority.

Data

The Powell River project conducted a follow-up survey of participants in the two Gatekeeper Training events. The survey was designed in consultation with the Quesnel project, to ensure comparability. Thirty-eight responses were obtained.

PRINCE RUPERT

The community of Prince Rupert is located on the West Coast of northern British Columbia. Approximately 20,000 people live in the community or in outlying villages that took part in the *Putting Best Practices into Action* project. The First Nations communities of Lax Kwa' Alaams (Port Simpson), Hartley Bay and Kitkatla are geographically separated, but linked to Prince Rupert through family, education, history, resources and economics.

Children in Lax Kwa' Alaams, Hartley Bay and Kitkatla attend elementary school in their own communities, but to attend high school they need to relocate to Prince Rupert. Most make the move, living with extended family members, but leaving behind most immediate family and many friends. It can be an extremely anxiety provoking transition for young people, in part because of the difference in size of the communities.

Prior to the release of the Best Practices Call for Proposals, agencies and individuals from Prince Rupert and nearby First Nations communities developed a very active local suicide prevention committee. The local committee had significant youth participation, a broad membership base, and a high level of vitality. This context translated into several innovative plans for youth support groups and a culturally relevant approach to working with First Nations communities to address the needs of at-risk youth.

The Prince Rupert project implementation differed significantly from the original plan. Part of this related to the challenges faced by the steering committee and the agency involved in implementing the project, and part to the community context.

What Was Implemented

The best practice strategies and activities planned and implemented in Prince Rupert included:

- *Peer Helping / Youth Participation / Support Groups for Youth / Suicide Awareness Education:* The core approach that the Prince Rupert project hoped to implement involved developing groups of youth — many of whom would be from the small First Nations communities — who would return to the villages and be involved in suicide awareness presentations to youth and other community members. Training for the youths involved in the project was supposed to start in early summer, but for several reasons was delayed until the fall (see challenges). Four village youth were unable to take part in much of the training. The youth who did the training did not visit the villages as part of the project, but were involved in presentations in schools and the community in Prince Rupert. The youths also organized a youth forum, sharing information about suicide prevention issues as well as providing opportunities for youth to communicate their concerns and perspectives. The trained youths took on informal roles as peer helpers but because of delays in establishing links to the school system, were not part of a formal peer helping program during the project time frame. Youth participated on the project steering committee from the beginning, and that appeared to maintain throughout the project.
- *Gatekeeper training / Suicide Awareness Education:* The planned gatekeeper training sessions for the First Nations communities did not happen. Towards the end of the project, one of the

coordinators did visit several villages with the School-Based Counsellor, and did information sessions about suicide prevention. Similarly, several suicide awareness information sessions were held in Prince Rupert, and the youths involved with the project took part in these sessions.

- *Community Development:* A key goal for the project was to link with the outlying villages in support of suicide prevention generally — establishing some linkages and supports where few were available. As noted, the youth support activities did not address the needs of the villages as intended, although information sessions were provided, and possible longer term networking activities explored. What the project did appear to achieve was a better recognition of the nature of the problems faced by the villages by those working in agencies and the school system in Prince Rupert. Some plans for future action were established.

Challenges Faced

The delay in project start-up affected the Prince Rupert project more than it did any of the others demonstration sites. The delay in announcing funding meant that advertising for and hiring the coordinator was not completed in time to adequately start working with the schools to identify and begin training for the peer helpers before the start of the summer. Significant momentum was lost, and the relationship with the schools was affected as well. It took most of the year to re-establish a significant and workable partnership with the schools, which was finally achieved with the School-Based Counsellors.

A further challenge faced was that there was a suicide in one of the villages in the project's early stages. The tragic suicide also served to demonstrate both the need for the suicide prevention activities, and some of the key challenges to introducing them. With the suicide the community shut down for a period, and it was very difficult for those involved with the project to gain access to the communities. Membership on the steering committee from the First Nations communities declined after this (although the suicide was not the only factor in this decline), and still has not reached previous levels of support and participation.

Dealing with the reality of the suicide made it imperative to address the cultural and linguistic issues that are barriers to the villages working successfully with Prince Rupert organizations. These included awareness of: 1) the reluctance in the First Nations communities to articulate the deaths as 'suicide', 2) the need to adapt the timing of activities to fit with community priorities and comfort levels, and 3) learning and communication styles that demanded more intensive and longer-term development than was accounted for in the initial proposal. As well, the very real strong impact of distance and isolation as factors in communication and participation was brought home.

A further challenge faced in Prince Rupert was an administrative one that affected several of the projects, but more in this community and Williams Lake than any of the others. Hiring a coordinator to implement the activities had several unanticipated impacts on the project. It created a management issue as the coordinator was hired by an agency but was asked to carry out the expectations of the steering committee. Several communication issues arose in the early stages of the project, and took some time to resolve. Reporting expectations by the committee and agency also needed to be worked out,

and this was further complicated by turnover and staffing issues for the coordinators. In total, five different individuals took on the role of part-time coordinator over the course of the project.

Key Lessons Learned

The management and administrative challenges faced by the project led to some of its most vital lessons. These included becoming aware of the need to clarify expectations, reporting relationships and roles at the very beginning of an interagency endeavour. It means that communication lines, timelines and expected outputs need to be very clear — particularly in a project such as this that had a tight timeframe from the beginning. In fact the decision to hire a coordinator itself contributed to some of the timing problems experienced by the project, as committee members who had been volunteering and taking an active role in doing committee activities tended to develop an unrealistic expectation that the paid coordinator would take over all such duties.

The timing of the project had proved to be critical to the implementation of activities for several reasons. One was the potential for delays, and their significance for what was expected and possible. Another was that the whole timeline was considered to be unrealistic when examined at the end of the project — it didn't adequately take into account delays, the school planning cycle, or the cultural challenge of working with the villages. Delays affected the participation of agencies, schools, volunteers and the youth participants, whose enthusiasm was difficult to maintain over the course of the project. In short, in addition to the problems caused in trying to fit the project to the needs and capabilities of community partners, the project delays compounded communications issues and made community buy-in and participation more difficult to achieve. On the other hand, persevering with efforts to include the schools in the project has helped to ground the efforts more securely for future endeavours.

FOCUS: *YOUTH PARTICIPATION*

Youth Participation involves the active enlistment of young people in decisions that affect them and their community. It recognizes and strengthens the natural interests and abilities of young people and gives youth a chance to play a meaningful role in planning their futures.

This strategy aims to increase the competencies and self-esteem of participating youth, as well as contribute to the development of a healthy community.

Youth Participation aims to:

- get youth involved in issues that interest them
- create opportunities for young people to develop skills such as leadership, decision-making, problem solving, communication and team-building
- enhance the self-esteem and self-confidence of young people
- provide opportunities for young people to form meaningful friendships with peers
- provide meaningful work experiences
- offer youth alternative and fun ways to spend free time
- facilitate the development of programs and services directed at youth that meet their needs and expectations
- foster a sense of belonging in the community
- contribute to the well-being and vitality of the community

Youth Participation as a best practice strategy takes advantage of the varied and unique opportunities for meaningful youth involvement that exist in all communities.

QUESNEL

Quesnel is a community of just over 11,000 people, with approximately 25,000 in the surrounding region. It is located in the central interior region of British Columbia about 120 km north of Williams Lake and just under 700 km from Vancouver.

The community has had a history of activity in suicide prevention, active since 1993 as a subcommittee of the Quesnel Child, Youth and Family Network. The local committee was less active for a couple of years prior to the start of the best practices project. Quesnel introduced community gatekeeper training in 1993, and had two people undertake the "Living Works" train-the-trainer program developed by the Suicide Information and Education Centre (SIEC) in Calgary in 1995. Both worked in the mental health system in Quesnel, and have been able to deliver at least two, and sometimes three two-day workshops a year. Since 1995, over 350 people have taken the Living Works gatekeeper training in Quesnel.

What Was Implemented

The best practice strategies and activities planned and implemented in Quesnel included:

- *Peer Helping / Youth Participation:* The Quesnel project anticipated introducing two approaches to peer helping in the project; one involved expanding (to 60 additional students) a more traditional peer mediator training in the schools, and the other introducing a teen help line by establishing a link to Prince George 120 km to the north. The school-based peer helping expansion was not implemented, in part due to financial losses experienced by the project (detailed under 'challenges'), and in part because the key contact within the school system who was to manage the youth training withdrew because of a demanding schedule. Late in the project a new teacher was found who is looking into addressing suicide prevention in a peer helping program for the new school year. The other initiative — the teen help line from Prince George — was established in November of 1999. Indications were that the help line had a low initial usage rate, although the timing of promotional material development and distribution affected awareness of its availability.
- *Suicide Awareness Education / Youth Participation:* The Quesnel project intended to have a local youth dramatic arts program — Students Kreating Innovative Theatre (SKIT) — provide dramatic presentations related to suicide prevention. The committee also planned to have '841 KOZ' visit Quesnel twice during the project period. The SKIT group ceased to operate before it could become involved. The second 841 KOZ presentation was cancelled because of the financial loss experienced by the Quesnel project. Building on the success of a previous community endeavour, a 'teen source card' was revised and printed for distribution to local students and youth. The cards were professionally designed with input from youth participants, who also contributed to an analysis of distribution processes through a survey and discussions. The teen source card became one of the key ways that the teen help line has been promoted. However, it was not possible to systematically distribute the cards in the schools prior to the end of the school year.
- *School and Community Gatekeeper Training:* Project funds were used to

cover the registration fees for youth and First Nations representatives to participate in Living Works training sessions as part of the project. Youth who are peer counsellors have in the past been offered the Living Works training. Three workshops were offered and attended by these groups over the course of the project, and post-training surveys appear to indicate the training was well received. The level of gatekeeper training saturation of service providers in Quesnel has been quite high, and many individuals expressed the view that this had contributed substantially to the lack of a completed youth suicide in the community since 1996.

- *System-Wide Protocols:* The community had made previous unsuccessful attempts to establish community and hospital suicide prevention protocols, yet significant anecdotal evidence suggested that many youth presenting at the hospital were subsequently released with no coordinated discharge planning and little contact with community agencies capable of providing follow-up services. The suicide prevention committee identified protocol development as a priority, yet it was an investigation by the Office of the Provincial Children's Commissioner that provided the necessary incentive for Quesnel to initiate protocol development. Prompted by the death by alcohol poisoning of a Terrace youth who had been discharged by both the Terrace and Quesnel hospitals, the Children's Commissioner ordered that a protocol be developed. The hospital, coordinating with the suicide prevention committee and representatives from the Ministry for Children and Families, developed a hospital-specific protocol. It is intended that this protocol will be the starting point for a broader community-wide protocol to be developed with input from all community partners.

FOCUS: *SUICIDE AWARENESS EDUCATION*

Suicide Awareness Education involves directly talking to people in schools and the community about suicide. Its focus is primarily on the classroom, however it can involve a wide range of information sharing methods and strategies.

The main purpose of this best practice strategy is to provide community members and youth with the necessary attitudes, knowledge and skills to be able to identify and help a potentially suicidal friend.

Suicide Awareness Education aims to:

- raise awareness about the problem
- encourage identification of at-risk students and young people
- teach students how to seek help
- provide information about mental health services
- promote the development of competencies such as coping and stress management skills, as well as interpersonal and communication skills

Suicide Awareness Education can be targeted to students in elementary and secondary schools, colleges and universities. It is most typically offered at high schools, and provided by trained school personnel or community mental health professionals. At the community level, it can be a broadly targeted approach to providing individuals adults and youth information about suicide, and as such it can be a precursor to more advanced Gatekeeper Training or Family Support.

Challenges Faced

The most pressing challenge faced by the Quesnel project was when the agency

holding the project funds went into receivership, and almost half of the overall project funding was lost. This affected several of the activities, and delayed others such as the printing of the teen source cards. While the funding loss could have been catastrophic for the project, several key donations in-kind allowed project activities to continue. These included costs of gatekeeper training that were underwritten by the First Nations group participating in it, and sessional funding from Adult Mental Health for the physician who participated in protocol development and staff orientation.

Another challenge for the project was keeping the energy and enthusiasm for the project high among people in the schools. This was considered to be a key element of the project, but over the course of the year the representatives from the school system were under pressure to deal with competing priorities. Any delays that occurred, such as printing the teen source cards or coordinating the suicide awareness content for the peer helping initiative, emphasized that fitting in with the schools depended on hitting windows of opportunity very carefully. This was particularly apparent and important in a short-term project.

The third major challenge faced by the Quesnel project was the time demand to participate in activities by volunteers. The project did not have a paid coordinator, and like the Powell River project, the project leads found themselves trying to do things 'off the sides of their desks." This problem was exacerbated by the departure from Quesnel in September 1999 of the mental health clinician who had been the suicide prevention team chair and coordinator. Her supervisor stepped in to fill the position, but was unable to allocate as much time to the project as the original chair had done. This time pressure contributed to a perception that the 'evaluation' demands of the project had to be traded off against the need to implement project activities adequately.

Key Lessons Learned

The challenges and activities implemented offered a variety of lessons about doing suicide prevention work in Quesnel:

- Some of the most successful suicide prevention planning efforts capitalized on 'waves of opportunity' — being ready to seize the moment and take advantage of windows of opportunity that arose, such as the Children's Commissioner's investigation and demand for a hospital protocol to be developed.
- It is more effective and more sustainable to incorporate efforts into broad-based community activities, particularly those with a community development focus.
- It is important to look for assistance wherever it might come from — such as SPIRC, evaluators, and other projects.
- Change is a constant in administering projects and developing communities, and it is both necessary and possible to anticipate change, and also cope with it.
- The most important key to sustainability of suicide prevention efforts in the community was seen to be building and maintaining links with other community development initiatives in Quesnel.

Data

The Quesnel project undertook several youth-administered surveys related to project activities, including one of students' knowledge of community resources such as the teen source card, a follow-up of project gatekeeper training participants, and also a five-year follow-up of gatekeeper training.

REVELSTOKE

Revelstoke is a geographically isolated community of just under 9,000 people, located in Eastern British Columbia between the Selkirk and Monashee Mountains at the Western gateway to the Rocky Mountains. There is one high school in the community.

The Revelstoke Youth Suicide Prevention committee is a subcommittee of the Revelstoke Child & Youth Committee. School District 19 was the lead agency for the project, and the school-based prevention worker coordinated project activities. While the project did not have a 'paid' coordinator, the fit between the project coordinator's regular job duties and those required to manage the project was quite close. The volume of work expanded somewhat, but most activities were considered 'doable' — the coordinator described the additional work emphasis not as something done 'off the side of her desk' but as an extension of her regular job. Even so, the coordinator noted that she needed to prioritize activities and drop some to keep things manageable.

What Was Implemented

The Revelstoke project's key activity was a peer helping program that employed a strong focus on generic skill-building and youth participation. Best practice strategies planned and implemented included:

- *Peer Helping / Youth Participation / Suicide Awareness Education:* Two peer support training retreats lasting 2-1/2 days were held in October 1999 (22 youths) and May 2000 (18 youths). The training included knowledge and attitudes about suicide, as well as the development of communications, problem solving, decision-making, helping, conflict resolution and leadership skills. Peer helpers were selected for participation based on over two hundred self, peer and teacher nominations. The focus of selection was not 'school leaders' as such, but on having a good cross-section of students who were parts of different peer groups. It included both those who would be 'good for the program' and others "for whom the program would be good'. In part this was done in reaction to previous studies that had shown the school leaders as the students most often involved in 'bullying' activities. Five peer helpers from the fall retreat assisted as senior helpers at the spring retreat. Peer helpers were active in school events, and making suicide awareness presentations.
- *Generic Skill-Building:* The main proposed project activity that was not implemented was for peer helpers to take generic skill-building and suicide awareness information into the elementary schools. This was not done in part because of timing demands, and in part because it was judged that the peer helpers were not yet ready to do so comfortably. An alternative event was done, which involved holding a grade 9 & 10 'Healthy Lifestyles Fair,' consisting of eight mini workshops on helping skills, conflict resolution skills, suicide prevention, self-esteem, stress management and anger management. The generic skill-building approach will be part of the current year's activities.
- *School & Community Gatekeeper Training:* A one-day workshop was conducted by the community's youth mental health worker in February 2000. The full day workshop was attended by 33 service providers, including teachers, counsellors, educational assistants, secretaries, youth employment counsellors, community living workers

and some youth participants. The workshop was designed to coincide with a teacher Professional Development day so teachers could take part, and also make linkages with other community service providers. Some of the peer helpers made two extremely well received student drama presentations at the gatekeeper training event.

Challenges Faced

Despite the seemingly ideal situation of having a school-based prevention worker available to coordinate the project activities, finding the time to do everything on top of an already full schedule was seen to be the major challenge faced in Revelstoke. Several team members suggested that the project was trying to do too much at one time, and that things could have been phased in over a couple of years rather than all attempted in a one-year project. In effect, that is what has happened, as a couple of activities — taking the generic skills program into the elementary schools, taking the suicide awareness education activities to families and other community members — have been postponed until the next year, but will be done eventually. Other activities that represent a natural expansion of those undertaken in the first year will also be developed, as the school focused activities expand to encompass more community linkages. In part, these activities are building on some of the linkages developed in the first year through the gatekeeper training, and through sharing information about the project to others on the Revelstoke Child and Youth Committee.

Perhaps the key challenge for the Revelstoke project was one that did not exist for other communities. In contrast to most of the other projects, connecting to the school and school board was relatively straightforward. The school had tried implementing peer helper initiatives previously, but with little success. The project team had to convince the school's administration that this approach had a strong chance of success. Being school-based, the coordinator then had easy access to school administration, teachers and counsellors, and was able to obtain timely and substantial buy-in and support. In the closest comparable situation, the Powell River project had the district school psychologist as lead for the initiative, and so had less problems in achieving buy-in and support from teachers and the school system than did other projects that had to advocate and negotiate from the outside. The challenge for Revelstoke consisted in linking effectively with community agencies and contacts, and ensuring that the project was not only a school initiative.

Key Lessons Learned

The first 'lesson learned' by the Revelstoke project was about trying to do it all at once — that rather than trying to do many things, select fewer and do them very well. Those interviewed noted that the best practices should be implemented together rather than on their own, but that this does not need to always be a simultaneous implementation, but sequential if that makes more sense. Activities like youth participation can be woven into a variety of project activities, and enhance their success. Others make natural links, such as generic skill-building and peer helping. But trying to do peer helping, gatekeeper training and suicide awareness education could easily turn into a significant logistical challenge, and could lead to less effective implementations.

Another lesson learned in the Revelstoke project was how important it was to modify the best practice approach to meet the specific needs and opportunities available in

the community. While other peer helping programs had been tried unsuccessfully in Revelstoke, the approach was adapted to fit the school and community context. How peer helpers were selected, the nature of the training event, and the support for activities among other school personnel were changed to make the approach work.

The theme of change was part of the third key lesson for the community's best practice implementation — having a comfort with adapting the project 'on-the-fly.' The Revelstoke project made small but numerous changes to their approach over the course of the project, and so the end result did not look exactly like what was initially proposed. But by taking advantage of opportunities (such as the youth drama presentations that were incorporated into the gatekeeper training) or by anticipating potential problems (postponing the elementary school information sessions until the next year), they were able to succeed and build a longer term and sustainable project.

Data

The peer helpers taking part in the project were surveyed at three points in time — with a pre-training knowledge assessment, a post-training evaluation, and a three-month follow-up knowledge and attitude survey. The data for all three were linked for following up on progress over time. A longer-term knowledge and skill assessment is planned for later in the year.

Those taking part in the gatekeeper training completed pre- and post-training knowledge surveys, as well as a workshop satisfaction evaluation. Longer-term follow-up is not anticipated at this point in time.

FOCUS: *PEER HELPING*

Peer Helping involves non-professionals undertaking a helping role with others. In the context of youth suicide prevention, Peer Helping programs are aimed at strengthening the helping networks that naturally exist within peer groups by selecting and training children and adolescents to become helping resources for their peers.

By listening, talking, helping with homework, or acting as 'buddies' to other students, peer helpers contribute to the well being of the student population by increasing the quality and quantity of help available within peer groups. Peer Helping programs are usually based in schools, but can also be implemented in other youth settings.

Peer Helping programs generally aim to:

- train selected youth in basic helping and communication skills
- promote the personal development of students in the helping program, including self-confidence, communication skills, problem solving and decision-making capabilities
- use peer helpers throughout the school (or other program area) in a role of support for peers
- provide a source of referral for teachers and counsellors for such problems as isolation or poor achievement
- provide a bridge between troubled students and professional resources
- contribute to the development of a positive and caring environment for youth

Peer Helping programs can be developed for diverse student groups and settings, with a variety of program goals, methods of recruitment, types of training and supervision provided, and roles and responsibilities for the peer helpers. Most programs emphasize non-counselling roles for peer helpers.

RICHMOND

Richmond is a coastal city of over 160,000 people located immediately south of Vancouver. It is comprised of a series of seventeen islands in the mouth of the Fraser River. The city has 42 elementary schools, giving it the largest population base of the seven demonstration projects.

The lead agency for the Richmond project is Chimo Crisis Services, a non-profit organization that uses professional staff and trained volunteers to provide counselling, support and education to families in crisis. Services include crisis lines in English, Cantonese and Mandarin. The agency has expertise in suicide intervention, and also has experience in making suicide prevention presentations. It delivers workshops on stress management and suicide prevention to approximately 2,500 youth in the high schools annually.

The Richmond best practices project "Stepping Out" grew out of a growing concern in the community that students between the ages of ten and thirteen were experiencing crisis and that there was a gap in information and support to this age group.

What Was Implemented

The best practice strategies and activities planned and implemented in Richmond included:

- *Generic Skill-Building / Peer Helping / Youth Participation:* The key element of the Richmond project was building on Chimo's experience in doing stress management and suicide prevention presentations in the high schools. These are typically one-hour presentations by Chimo staff and volunteers. The 'Stepping Out' program provided weekly generic skill-building workshops for seven weeks duration to grades six and seven students at two schools. Three 40-minute classroom sessions were done per school in a two-hour span, using senior teen volunteers as presenters. The project tried to include some peer helpers in the presentations, but they found it difficult to fit into already busy schedules. The youths doing the presentations had helped design and develop the curriculum for the program, and had undertaken training related to classroom management, learning strategies, presentation skills and group facilitation. The sessions were highly interactive, and dealt with building emotional resiliency through such topics as problem solving, diversity, friendship, assertiveness, coping with bullying and stress, and discussing resources that are available. Because of the age of the children in the sessions, and the emphasis on building resiliency in a presumably healthy population, the presenters did not use the word 'suicide,' but focused exclusively on positive actions and role models.
- *Community Gatekeeper Training / Suicide Awareness Education:* Brief (one to three-hour) community gatekeeper training sessions were conducted, involving youth volunteers as presenters. These sessions were similar to suicide awareness sessions. The Richmond project planned to have an "Ask-Assess-Act" school gatekeeper training session in the spring, but it was cancelled because of the MCF travel restriction. The school district is planning to bring the training to local schools in the coming year.
- *Community Development:* Through a multi-agency steering committee, Chimo was able to bring the interests and

resources of diverse agencies to the table, and to help the schools to begin implementing a program that it would have otherwise been more difficult to undertake. Indeed the youth participants made the emphasis on skill development possible by working with students in small group settings. The program builds on prior efforts, makes use of community resources, and has been designed to be sustainable. Curriculum and process development in the first year will lead to expanded implementation in the next two years, and additional one-year funding for the program has been obtained from sources external and internal to the community.

Challenges Faced

As one of the projects that had hired a part-time coordinator to oversee the implementation, the Richmond project was focused on completing the 'development' work within the year, so that the curriculum and processes could be used in other schools over the longer term. In the interest of sustainability, the short timeframe for the project was experienced as a constant pressure — to complete the development work and to build for the follow-up implementation.

Timing was also a pressure for the project in another way. Building relationships with the school district and schools was a high priority for the project, but the schools, understandably, were also focused on a range of other projects. While each stage of negotiating the content and process of the workshops was 'proceeding at a reasonable pace' for the school district, it appeared to be excruciatingly slow for the project coordinator and youth volunteers, who did not have the luxury of being able to wait until the next school year to implement the project. The development and approval process delayed the implementation so that it did not finish until into May of 2000. This affected the ability of senior level peer helpers and youth volunteers to participate

FOCUS: *GENERIC SKILL-BUILDING*

Generic Skill-Building programs teach relevant life skills to children and adolescents. The aim of this best practice strategy is to enhance young people's personal capabilities so that they can more effectively adapt and deal with daily tasks, challenges and stresses.

In the context of youth suicide prevention, Generic Skill-Building aims at enhancing certain factors that are known to protect against suicidal tendencies, including problem-solving, healthy coping and interpersonal competence, which in turn contribute to positive self-esteem.

Generic Skill-Building programs aim to:

- provide children and adolescents with generic and lifelong skills that they can apply in a variety of situations
- facilitate the development of meaningful relationships with peers, family members, teachers and other adults
- teach youths to recognize unhealthy social influences in the environment and make healthy choices about those influences
- enhance personal resources such as a sense of well-being, self-esteem and competency

Generic Skill-Building programs are directed towards all children within particular age ranges. The strategy is pro-active in that it targets 'unaffected' children and adolescents in order to strengthen their adaptive capacities. Most programs address one or more of the following skill sets: 1) social skills, 2) problem solving and decision-making skills, or 3) coping and stress management skills.

in delivering the program in the classroom, because as the end of the school year neared, they became more focused on exams and completing final projects.

Another challenge faced by the Richmond project was unique among the seven demonstration sites, and related to the size of the community and it's organizations. The multi-stakeholder project advisory committee established to develop the proposal and oversee project implementation was composed of senior level representatives from diverse organizations. The individuals involved were consistently faced with competing meeting schedules, and attendance at monthly committee meetings was irregular. Further, the individuals taking part were well placed to be able to speak for their organizations and make sure that perspectives offered were appropriate and official. However, they were not always the hands-on people from their organizations who knew how things got done, and this resulted in decisions and activities involving other organizations becoming two-staged. First they were discussed at the meeting, and then the correct front-line individual was identified, proper authority established, and then the details worked out. This added time and complexity to project implementation.

Key Lessons Learned

Having a part-time coordinator contributed to an important lesson in the Richmond project — involving youth in designing and delivering the generic skill-building program in the elementary schools was not just a token effort. The project could not have been done without that participation. This goes beyond the volume of work that needed to be done. It reflects the character of the input, particularly in the classroom. The seven-week series of sessions was highly interactive, and used the youth volunteers as small group leaders who practiced skill-building exercises with the students. Teachers noted that even if they had the curriculum available, they would not have been able to implement it on their own. The fact that the youth participants understood that the project could not be implemented without them also contributed to the seriousness and dedication they gave to the task, and made the learning experience more meaningful for them as well.

Other learning from the project:

- The project would have been better off applying for a two year implementation rather than trying to do it all in one year.
- Some of the training of youth facilitators was conducted by trainers who usually work with adults. In future, training will be done on-site by staff who typically work with youth.
- The seven-week generic skill-building training has important precedent-setting ramifications for the relationship between agencies and the schools. By moving beyond singular *ad hoc* presentations, they are introducing the potential for a more comprehensive approach to addressing prevention.

Data

The Richmond project employed the most comprehensive and quasi-experimental research design, with pre- and post-test surveys, a comparison group in another school, and detailed follow-up of youth and others involved in the project. Most of the data are still being tabulated, and longer-term impact analyses may be possible. A broader survey of more than 2,000 youth taking part in suicide prevention presentations gathered information on natural helpers.

STIKINE REGION

The Stikine Region consists of several predominantly First Nations communities (Tahltan and Kaska) in the north west area of British Columbia. The largest communities in the region are Dease Lake, Telegraph Creek and Iskut, with 700, 450 and 350 people, respectively. The total population of the region is approximately 2,000. Dease Lake, the centre of the suicide prevention committee that wrote the proposal and oversaw project activities, is located on the Stewart-Cassiar Highway (#37) approximately an eight hour drive north of Smithers in north-central BC.

The project owed much of its impetus to a tragic youth suicide in Dease Lake in the fall of 1998. Members of the communities of Dease Lake, Telegraph Creek, Good Hope Lake and Iskut collaborated on developing a proposal that emphasized community development and a regional preventative approach to dealing with a very high and what seemed to be increasing level of suicide and suicidal behaviour among young people. The public meetings related to proposal development enabled some youth to participate in discussions about how to address such issues as the long winter isolation of the region, and the lack of gathering places or organized activities for young people. A key part of the proposal requested resources to address the high costs of travel to and within the region.

At the start of the project, the coordinating agency was the Stikine Health Centre in Dease Lake, and it retained responsibility for the financial side of the project. However, as the project progressed the Tahltan Band north of Dease Lake oversaw project activities and hosted suicide prevention committee meetings. The project began with a part-time volunteer coordinator (a member of the suicide prevention committee), who later took on the responsibility as a paid coordinator.

What Was Implemented

- *School & Community Gatekeeper Training:* A gatekeeper training session was provided in Dease Lake for 20 people by Ricki Devlin, who also followed up with individuals and professionals on a one-to-one basis. Members of the suicide prevention committee took part in the training. Additional 'Ask-Assess-Act' gatekeeper training was conducted in fall 2000 after the project's official completion date.
- *Generic Skill-Building / Suicide Awareness Education:* The Chair of the Stikine Region suicide prevention committee for most of the year was the school's counsellor and youth worker. She worked with the committee to have the school host a wide range of culturally appropriate workshops and presentations by First Nations leaders, the First Nations Emergency Services Society, and other noted trainers, including Gleneric Waldic, Darien Thira, Rueben George, and Ricki Devlin. The topics included Anger Management and Coping, Stress Management, Drug and Alcohol Awareness and Self-Esteem. Workshops took place in Dease Lake and Good Hope Lake. A variety of community members participated, including youth from the schools, parents and services providers. It is not clear how much representation there was in these training sessions by people from Iskut or Telegraph Creek.
- *Peer Helping / Community Development:* A five-day peer helping training program was provided in a retreat in Vanderhoof, BC for six First

Nations youth. The community of Dease Lake has access to the Prince George Teen and Crisis Line, and this was advertised locally as part of the project. A local crisis line was initiated by the suicide prevention committee. The committee developed a pamphlet about suicide and distributed posters widely in the area, listing the phone numbers of twelve volunteers from the committee. Committee members received 75 phone calls over the course of the project. The local crisis line was an example of the community's efforts to take the issue of suicide into local hands — offering a peer helping approach by local and known individuals, and openly addressing the issue of suicide and suicide prevention in a public context.

Challenges Faced

Two broad groups of factors contribute to the high rate of suicide and suicide attempts in the Stikine Region. One is the isolation and distance in this very large geographic area with a small population, particularly in the wintertime, when extreme weather conditions compound the distance and isolation. The second is a group of inter-related historical factors that contribute to ongoing tensions in the community through successive generations. These include the history of the Tahltan and Kaska First Nations peoples in the region; residential schools, inter-nation tensions and rivalries, and a history of high levels of alcohol and drug abuse in the region. The cultural barriers to progress in the area included reluctance among the First Nations peoples to discuss local deaths as 'suicide.'

While the adversity of local youth suicides served to unite the Kaska and Talhltan nations and the region's communities, and allow them to move beyond historical differences to develop a joint proposal and regional plan, this approach did not appear to last long into the project. Over the longer term, it will be necessary to find a common ground on which the communities can agree and work together to address suicide prevention approaches and activities.

Contributing to the issue of the history of the region and how it impacts on present day community members is the ongoing legacy of how the community interacts with those in other parts of the province who would provide assistance. Many of the professionals (social workers, teachers, health care professionals, and drug and alcohol workers) who come to work in Dease Lake or other region communities do so as part of a two-year rotation. This is similar to the experience of the Prince Rupert project, where professional staff turnover is high, and there are difficulties in developing and hiring local people to take on service provider roles. High turnover means that many of the working professionals and service providers are not in the community long enough to develop a sense of the local history of community problems, and are not able to incorporate this understanding into their work with community individuals. Indeed, several service providers involved at the beginning of the project left the community soon after it began, and so turnover has been an issue even for a one-year project implementation.

As part of the community development part of the project, the committee worked to integrate existing workers such as teachers and service providers through information sessions and circles. One such circle at the Dease Lake School provides opportunities each Monday morning for all teachers and students in grade nine and above to briefly connect and relate on a personal level, rather than only as teachers, students and administrators. This approach appears to have improved overall school

communications, and has served as an introduction to community issues and priorities for those teachers who are in the community on a short duration rotation.

The other key challenge faced by the suicide prevention committee was the difficulty in trying to sustain a volunteer local crisis line in the community over the long term. While the approach seems to have had several positive impacts, it has led to burnout and fatigue among committee members. The majority of calls came between midnight and five a.m., and several committee members and crisis-line participants have quit the committee to take time off, as the work has started affecting their other work as service providers in the community. This has compounded the impact on those committee members remaining, although the number of calls has declined significantly since the crisis line approach was started. The project highlighted the trade off between crisis intervention and prevention activities by committee members — many of whom are community service providers.

Key Lessons Learned

In coping with challenges faced by the project, the community got a taste of the potential that collective action holds for addressing suicide prevention in the Stikine Region. Getting the different bands and communities to work together, at least temporarily, had a strong impact on the sense of hope and control over a difficult and emotional situation. But it also became clear that the community needs to learn to work together better in the good times.

Community members also learned that it was possible to address long term historical issues, and that this represents a form of prevention for the next generation.

FOCUS: *COMMUNITY DEVELOPMENT*

Community Development refers to a process of social action in which the people of a community come together to identify their common needs and concerns, make plans to meet their needs or solve problems, and implement plans with a maximum of reliance on community strengths and resources.

The broad goal of Community Development is to enhance the well-being of an entire community in order to enable individuals to experience productive and satisfying lives.

Community Development aims to:

- strengthen the ability of communities to respond effectively to their social, economic and health needs
- increase self-reliance and the decision-making power of a community
- increase self-esteem, social contact and mutual support among community members
- improve the level of skills and knowledge of community members
- improve social health and community cohesion
- build a sense of community belonging

The principles and processes of community development have been used extensively around the world to address very diverse issues, but are based on beliefs and assumptions that include:

- progress is possible
- 'bottom-up' initiatives have a better chance of success than 'top-down' ones
- communities have important resources
- changes people make for themselves have more meaning and validity
- collective action is more effective than individual action
- participation in a community's public life by citizens is valuable and important

WILLIAMS LAKE

The community of Williams Lake is known as the 'Hub of the Cariboo' in the central interior region of British Columbia. With a population of over 22,000, Williams Lake is a distribution and supply point for the Cariboo Chilcotin area, at the cross-point of the BC Railway and highways north to Prince George and west to Bella Coola.

The Williams Lake Suicide Prevention Task Force has been working together every year except one since 1992. It has inter-agency and inter-ministerial representation, and has had a history of active coordination and planning. The proposal prepared by the Task Force (the committee) outlined an ambitious approach that would facilitate development of a three-year plan, and would involve initial implementation of that plan.

This project experienced more unanticipated transition than most of the projects. The leadership of the committee turned over soon after the project started, and a coordinator was hired from outside of the community to undertake key activities. From the beginning there were some communication issues between the coordinator and the committee, and these were exacerbated by turnover among senior committee members, and by the reality of having a volunteer committee overseeing the work of a paid coordinator. In some ways this situation resembled the experience in Prince Rupert, although in the case of Williams Lake the problem seemed to reflect a lack of clarity over how supervision was to be conducted, and by whom. This was addressed half way through the project.

What Was Implemented

The best practice strategies planned and implemented in Williams Lake included:

- *Youth Participation:* Youth actively participated on the committee and at least one subcommittee, and in planning and implementing two community forums. The first forum was attended by few youth, but had a good turnout of those interested in working to further youth interests in the community. The second forum had a much higher level of youth involvement in planning, development and active contribution to the event — 75% of the 120 participants were youth.
- *System-Wide Protocols:* The Williams Lake project identified one goal to be updating the community protocols. The subcommittee addressing this issue undertook several processes to facilitate this, including a survey of agencies and service providers, and meetings that examined specific examples of how the community had dealt with prior crisis situations. The community coroner participated in some of these meetings and contributed good examples and relevant information. Some progress in developing community protocols was made, but much remains to be done.
- *Peer Helping:* Preparatory work for the introduction of peer helping programs into several schools has been done, including a two-day retreat for students and parents focusing on information sharing about suicide prevention and the usefulness of peer helping. Although several schools have expressed interest and the intention to introduce more comprehensive peer helping programs in the near future (possibly this year), the relationship between the committee and the school district (#27) was not significantly transformed over the year.
- *Suicide Awareness Education / Gatekeeper Training / Community Development:* One of the key tasks that

the committee hoped to undertake was the development of a three-year plan for the delivery of community gatekeeper training. This activity was at the centre of a great deal of the disagreement between the project coordinator and the committee. Much of the preparatory work for the gatekeeper training undertaken by the coordinator could be considered suicide awareness education, and as such was a community development exercise that demonstrated important project outcomes that were noted by committee members and others in the community — and in particular by the First Nations communities in the broader region.

Challenges Faced

The turnover of the project's leadership complicated many aspects of the overall implementation, including the reporting relationship between the coordinator and the committee, the committee's shared vision of project goals, and the continuity with past activities. Communications between the coordinator and the committee deteriorated over the course of the project, but the situation did not become clearly apparent to the committee until mid-way through the project. By then, the implementation had taken a path with which the committee was not comfortable, but from which it was difficult to shift. At the same time, the communication divide between the coordinator and the committee was made more difficult because the coordinator believed she was undertaking activities necessary for the project's success, and that these activities were consistent with project goals described in the original proposal.

Project reports prepared by both the coordinator and the committee enumerated a wide range of project activities that included conducting:

FOCUS: *SYSTEM-WIDE PROTOCOLS*

Protocols are formal, written statements that guide activities of an organization or community following a critical incident like a death by suicide or a suicide attempt. A System-Wide Protocol represents a joint agreement between key agencies within a geographic area that reflects a coordinated response to youth-at-risk. System-Wide Protocols document the procedures to be followed by each organization in the aftermath of specific situations.

The broad goal of System-Wide Protocols is to ensure that at-risk and vulnerable youth receive a coordinated, timely and effective response from the network of community service providers, including assessment, treatment, follow-through and support. System-Wide Protocols aim to:

- clarify the roles and responsibilities of various community service organizations (agencies, hospitals, government)
- increase awareness of the range of community services available to at-risk and vulnerable youth and their families
- increase accessibility to community services for those at-risk
- increase coordination between agencies
- open communication channels between agencies
- ensure that information about client that flows between organizations is both timely and appropriate
- avoid service duplication, agency confusion, and inappropriate referrals
- identify gaps in services for at-risk youth and determine which organization is best equipped and mandated to address gaps

System-Wide Protocols demand senior level participation and buy-in by representatives of key agencies. Protocols describe: 1) intervention and post-vention processes, 2) key agencies and resources, 3) training expectations, and 4) how to communicate, review and evaluate the protocol.

- sixty community awareness meetings, with information about the project, committee and youth suicide,
- fourteen presentations to potential community gatekeeper organizations, covering community protocols and information about youth suicide, and
- nine community workshops, of which four were with the Canoe and Dog Creek Indian bands, covering information about suicide and possible interventions.

The committee had noted that a major gap in the community's suicide prevention activities was significant involvement by the region's First Nations peoples. The committee's report also notes the benefit of the coordinator's connection with the native community through presentations. In the longer term, it appears that gatekeeper training will be conducted in the region's native communities.

Without taking sides in the unfortunate (but not unprecedented) miscommunication between the coordinator and committee in Williams Lake, if we reframe some of the disputed activities it is possible to understand them as part of the community development process that occurred. The committee, in talking about project goals, spoke of community awareness rather than gatekeeper training, although that was the 'official' best practice strategy discussed in their report. Yet the activities encompassed several best practices working in concert — suicide awareness education, preparatory work for gatekeeper training, and a community development approach focused on planning and building appropriate to the community's needs. The project's goals were ambitious, were in many ways treated as disparate, and were addressed using three subcommittees. The committee acknowledged the development work that was achieved, but raised a concern about following through with no coordinator to oversee the implementation.

One further challenge experienced in the project was that progress toward developing protocols was frustratingly slow. It involved identifying potential participants, examining internal protocols for numerous agencies, reflecting on such issues as the privacy concerns of those affected by the protocols, and the appropriate processes for deciding roles for different agencies. In short, it was a very complex process, made even more complex by the sheer number of organizations that needed to be consulted in the inclusive approach that was preferred by the committee. The committee expressed frustration at the difficulty it experienced in trying to complete the protocol process within the project's one-year time limit.

Key Lessons Learned

The suicide prevention committee in Williams Lake is large, has a long history, and strong links to diverse community agencies. Yet it is possible for a committee with such rich resources and strengths to over-extend itself. The committee may have been trying to undertake too many activities at once, or perhaps trying to undertake them in too short a time frame. Either way, the community will benefit from viewing the various endeavours more holistically, and seeing how best practices can be complementary in implementation. Committee members worked hard and were emotionally drained at the end of the project, but expressed hope for future re-vitalization.

The committee also appears to have made real progress in working with the First Nations peoples of the region. It has moved toward developing a more empowered process for local bands to gain skills and knowledge that will allow local training and workshops to be designed and conducted.

3. Best Practice Strategies

This section of the report presents an analysis of what happened in the seven demonstration projects. It is based on 1) findings of local research that included surveys and follow-up to activities, 2) interviews with key individuals in each of the communities, including the project team and leadership, 3) project reports submitted to SPIRC summarizing activities and findings, and 4) follow-up of non-funded communities that applied to be part of the best practices initiative.

The section provides a more detailed examination of the eight best practices strategies implemented in the projects. It does not examine the seven best practice strategies that were not addressed.

GENERIC SKILL-BUILDING

Powell River, Richmond, Revelstoke and the Stikine Region were the key projects introducing generic skill-building strategies. In Powell River and Revelstoke, this primarily took the form of skill-building as part of a peer helping program. The peer helping training focused on helping those who would help others, by giving them strong skills to model to other students, and enhancing their personal resources.

In Richmond the efforts were more directly targeted to all youth in selected classrooms. Revelstoke addressed skill-building through a one-day 'healthy lifestyles' fair for grade 9 and 10 students. In Dease Lake a variety of sessions were held for youth in the school. Common to all of these efforts was an approach that included information as well as the opportunity for practice — through experiential learning techniques, role-plays and discussion. The emphasis in the training was on problem solving and coping skills, although broader social and communication skills were addressed, particularly in the peer helper training programs and the Richmond project.

A consistent theme in post workshop and training surveys completed by peer helpers and students in the generic skill-building programs was the value of the hands-on and experiential activities. They considered them to be fun. But they also practiced the skills, were able to recognize and talk about them, and apparently remembered the skills and activities between sessions.

Pre- and post-training surveys of two groups of peer helpers in Revelstoke showed strong self-rating increases in a variety of generic skills, including leadership, listening, and self awareness. **Table Three** ranks statements about these skills by the change in the percent of students who strongly agreed with the statement.

TABLE THREE

SKILL-BUILDING IN REVELSTOKE:
Ranking Changes in Skills by Peer Helpers *

Statement	% Increase
1. I am open-minded, and able to accept that others have the right to hold different views	55%
2. I am aware of how my behaviour affects others	51%
3. I am aware of others' feelings	50%
4. I am able to listen to the concerns of my friends	45%
5. I am able to think positively about myself	38%
6. I am able to help my friends with any problems they might have	33%
7. I am able to deal with my feelings	29%
8. I am a good leader	28%
9. I am aware of my feelings	23%
10. I make an effort to include people in what I do	23%

* *Increase in the percent of peer helpers who strongly agreed with the statement; % • pre- and post-training*

The Richmond project employed a strong youth participation emphasis, as well as peer helpers from the high schools to deliver the 'Stepping Out' program. A group of youth volunteers participated in developing the curriculum, took training on presentation and facilitation skills, and co-delivered the curriculum in two schools to a total of six grade six and seven classes.

A strength of the Richmond project was that its use of peer helpers and youth volunteers was not an adjunct to the project, but central to its success and sustainability. Teachers noted that even if they had the curriculum developed for them, they could not deliver it themselves without assistance by other teachers, assistants or older youth. This is primarily because the curriculum is heavily focused on interactive and hands-on learning, using practice, role-plays, games and small group discussion. Youth volunteers bring energy and their own relevant experience to this learning situation, and it enables a kind of interaction and focus on skill development that is very difficult to achieve in a full-classroom situation.

The initial curriculum developed for the Stepping Out program was intended to be twelve weeks in duration. The school district's perspective was that this should be reduced to two weeks, and the final negotiated length of the program was seven forty-minute sessions offered once a week. Schools, the school district and the project coordinator expressed satisfaction with the final compromise, particularly after it was delivered. Teachers expressed enthusiasm for the input of youth volunteers, and post-training surveys showed agreement between students and teachers concerning what they found to be interesting and useful. The Stepping Out program did not use the word 'suicide' — its focus was on resiliency. The seven sessions dealt with diversity, positive role models, bullying (particularly good for this age group), friendship, coping with stress, social support, peer pressure, assertiveness, and community resources.

The Richmond project coordinator painted a vision of how generic skill-building could look in the future. In an ideal world, teachers and students would do the generic skill building every year, and it would build each year on what was done before, with some refresher, practice and new ideas. It could also be timed to coincide with other complementary aspects of the curriculum, or to take advantage of topical situations. Grade six and seven students could receive, for example, a bullying and peer pressure component. And grade eight students could focus on stress management and assertiveness. By the senior years, students would be involved in helping with the instruction of younger students.

Ongoing or annual participation in generic skill-building would also fit with something noted by people in several projects; that developing generic skills is not a one-time activity. It needs repetition and practice.

Key Learning

- Practice, experiential learning, and role-playing are all important aspects of generic skill-building. Repetition and practice are not only important within a grade level, but between them as well.
- Generic skill-building is appropriate for children in grades six and seven. The curriculum can be adapted to meet the capabilities and interests of students in a wide range of grade levels.
- Having older students involved in teaching younger ones reinforces skills, and allows more comprehensive practice and small group discussion time.

- It is not necessary for programs to directly address 'suicide' for them to enhance suicide prevention. Resiliency clearly focuses on before-the-fact support for a population, and as such, fits well with a wide range of other prevention initiatives.

PEER HELPING

One of the first observations about how peer helping has been implemented across the projects is the diversity of approaches used. This diversity extended across several facets of project activities — who took part (youth from grade nine to out of school, adults), the form of the training undertaken (workshops, 2-3 day retreats that included youth and / or teachers, parents), and what the peer helpers did after their training.

Richmond's project invited the participation of existing peer helpers to assist with the generic skill-building program. It offered them limited training related to their role, but built on their previous experience as peer helpers. Other youth volunteers were given comparable training that encompassed topics and skills that greatly overlapped those emphasized in traditional peer helping programs.

Taking advantage of the ongoing suicide prevention and stress management presentations that it had been giving for some time, Chimo conducted a large post-workshop survey of high school youth in grades nine and eleven. One of the questions solicited information about the 'natural helpers' that students turn to with problems or in times of crisis. As **Table Four** shows, friends topped the list, which included high proportions of other youth helpers such as siblings, cousins, boyfriends and girlfriends.

Powell River's project also took advantage of a previously existing peer helper program in the high schools. It added specific content related to suicide prevention to the training undertaken by peer helpers, and widened the potential types of presentation that the group could do. The Youth Voices program maintains continuity by having some of the senior youth return for several years, and taking part in the training each year. Ongoing weekly support sessions are held throughout the school year. For the project, some older, out-of-school youth were also invited to participate in the program. The Powell River peer helping program focused on innovative presentations, drama, and fun workshop sessions with students in different school levels and adults. In this project and in the Revelstoke project peer helpers were part of presentations to those attending gatekeeper training workshops, and in both situations the impact was reported to be both impressive and effective. The youth participation helped bring an immediacy and imperative to the topics of discussion that the adults found very worthwhile.

TABLE FOUR

NATURAL HELPERS IN RICHMOND:
Ranking of Persons Turned to For Help *

Natural Helper	% Indicating
1. Friend	79%
2. Mother	72%
3. Sibling	49%
4. Other relative	56%
5. Father	44%
6. Boyfriend / girlfriend	34%
7. Cousin	32%
8. Teacher	20%
9. School Counsellor	10%
10. Clergy / Priest / Rabbi	8%
11. Other school staff	7%
12. Doctor / Nurse / Therapist	6%

* *Percent of students saying they had gone to natural helpers in the previous couple of years.*

Revelstoke had made several previous attempts to bring in a peer helping program, but none were successful. The present program, focused on prevention, with suicide prevention at the forefront, has made a strong impression on both students and teachers. While it is not clear that the prevention focus has been the main reason for the success of the program, it has clearly been seen as both relevant and worthwhile by those taking part. Part of the success likely relates to how peer helpers were selected for participation. For example, recent research at the high school had indicated that it was the school leaders and those who would most likely participate in a typical peer helper program that were responsible for most of the bullying and conflict. In response to this awareness, those chosen to be peer helpers were from all grade levels and social groupings — they were not the top students, and in many ways were 'typical'. The emphasis was on a combination of those who would be good for the program, and those for whom the program would be beneficial as well.

While some students nominated themselves as peer helpers, all of those who took part were also nominated by either their peers or by teachers in the school. Teachers tended to nominate students who were slightly older or who had slightly more developed social skills. Yet these students did not show a higher level of change or growth in their awareness, attitudes, self-reported skills or skills as assessed by the coordinator.

One of the most powerful benefits of the Revelstoke peer helper program as perceived by the coordinator, teachers and principal was that it encouraged students to communicate and interact across age, grade and peer groupings. It widened the range of student interactions of the peer helpers and those in their respective peer and class groups as well. In this sense it made a strong impact on the school climate, making the school a friendlier and more responsive place to be. In part this may reflect part of one of the typical cycles of a school — as the older kids graduate and leave, the tenor of the institution reflects the characteristics of those who remain. Most of the bullies who had been a problem in previous years had graduated the year before the peer helping program was introduced. Yet school staff expressed the perspective that the peer helping program contributed at least as much to the progress in the school as did the turnover in student population.

Teachers and administrators noted that even if students did not actually talk to a peer helper, just knowing that they were available if needed made an impact on the school climate. Such an impact was also noted in the unique peer helping program in the Stikine Region — its local crisis line.

The peer helping program in Dease Lake was not conceived as such at the beginning. It developed as one form of response to the community development efforts in the region — particularly to the suicide prevention committee trying to take local ownership and responsibility for change. The committee members took a gatekeeper training workshop in 1999, and in follow-up decided to develop a poster and brochure that would be distributed in the local area. The poster highlighted the names and phone numbers of twelve of the committee members, who would be available for crisis intervention. The members of the committee who posted their names received approximately seventy-five calls over the year. Many were at night, and over half were from adults rather than just youth. The impact appears to go far beyond the availability of 24 hour crisis line — which the community already had 'official' access

to. The people on the phone were local, and were peers. Callers were not calling an unidentified and unknown person, but someone they knew. Anecdotal information derived from community interviews indicated benefits beyond the calls that were made and people who were individually helped. Just knowing that there was someone to call made a difference. Community tensions decreased dramatically over the year, as did suicide attempts and suicides. There was one completed adult suicide in the region over the course of the project. The downside to the approach was the cost in effort and burnout to a small group of volunteers. This will be further discussed in a later section of the report.

Finally, several teachers, administrators and project leads asked the question, *"Why can't all students be trained as peer helpers?"* Certainly in many schools with a long tradition of peer helping, every year the pool of peer helpers is increased, and peer helpers are often involved in training for new peer helpers. As a tradition it makes sense, and it also does so as a bridge between an approach that endorses generic skill-building for the youngest participants, and at the other end, gatekeeper training for those with broader roles and responsibilities. The training has many similar elements, and the end goals are complementary as well — supporting people in their quest to help others by helping them to help themselves first, and others second, and their broader community beyond that.

Key Learning

- Suicide prevention can be an effective addition to traditional peer helping programs, or the centrepiece of one designed around its issues and focus.
- Peer helping programs help both those who take part in them and those who interact with the peer helpers, who can be role models or provide active support.
- A peer helping approach can be used with a wide variety of populations; youth from middle school to adults.
- Nominating peer helpers from diverse social groupings and grade levels can widen social groupings and types of interaction across the student population.
- Using a weekend retreat format enhances peer helpers' development as a group, and their ability to support one another through the school year.
- The availability of peer helpers can be a powerful support — even for those who do not ask for help. Just knowing peer helpers are there can make a difference.
- It is useful to think of peer helping programs as the middle of a continuum from generic skill-building to gatekeeper training. Peer helpers develop most of the same skills and knowledge addressed in both skill-building and gatekeeper training sessions, but do not have the same levels of responsibility or roles as those taking part in gatekeeper training.

YOUTH PARTICIPATION

The range of youth participation efforts across the projects was extremely broad. At one extreme, several projects had one or two youth who were junior members of project steering committees or who attended some of the meetings on selected topics. At the other extreme the Richmond project used volunteer youths working on several committees to develop, advertise, deliver and evaluate their generic skill-building program. The youth were integral to the delivery of the training, and it is clear the project could not have succeeded without that participation.

Between these extremes, projects found a variety of innovative approaches to involving youth in suicide prevention efforts, often in unexpected or unplanned situations. Other than participation on a planning or steering committee, the most common involvement by youth in projects was in participating in presentations about suicide to the public or at skill training sessions. Most projects examined the views of youth participating in this way, and results consistently indicated high levels of satisfaction with the participation.

The Quesnel project got youth involved in the design of a 'teen source card' by means of a survey of youth awareness about resources, and reaction to a copy of the previous card. They gathered information about how to make it more useful or interesting, and also about how they had been distributed in the past. This information has led to a new strategy for card distribution, which will involve making them part of a series of suicide prevention presentations in the schools. In this way, involving youth in even a relatively minor way has expanded the scope of suicide prevention activities in the community.

Youth in Prince Rupert and Williams Lake were involved in developing and implementing youth forums. In Williams Lake there were two — an initial one, "Making All Our Children a Priority," that had minimal youth input and involvement in the event, and a second forum, "Circle of Hope and Life," that had a great deal of youth input into planning, fundraising, organization and promotion. The second forum had 120 people attend, of whom 75% were youth. All three events were judged to be successful, but the Circle of Hope and Life forum made several strong statements to the community about youth concerns, and dealt with practical issues in a way that encouraged dealing with them. The issues included 1) the relationship between youth and the RCMP, 2) tolerance and trust of youth in the city's mall, 3) parent-youth issues such as trust and communication, 4) activities for youth to do, such as dances and volunteering, and 5) youth wellness issues that included loneliness, depression and isolation. In addition, youth obtained information about services and resources available in the community, and learned about opportunities for participation in community planning and other activities.

The Prince Rupert forum involved peer helpers in promotion, developing and distributing a brochure and a newsletter, and actively coordinating the forum from start to finish. Both communities demonstrated that youth participation is easier to obtain and maintain when it is for a cause about which the youth can take some ownership. The forums were about issues that concerned them, and allowed them to be involved in a way that allowed their participation to make a difference. The youth were then available and interested in speaking about other issues as they arose, so their involvement could expand or contract based as needed.

One of the projects that applied for funding but was turned down made excellent use of this kind of youth involvement. School District #33 in Chilliwack had youth volunteers take part in the "AD Rundle Family of Schools" resiliency project by delivering parts of the program and undertaking much of the evaluation work. Many of the youth were students at local colleges, and their participation contributed to course credits, and has been built in as a long-term educational plan by various faculties, including Nursing and Social Work. Several communities in the best practices project similarly used the provincial CAPP program to initiate and

maintain youth involvement in project activities.

The Richmond Stepping Out program's use of youth volunteers in all aspects of the project represents the most coordinated and long term strategy for youth participation. The project committee hopes that future graduates of the resiliency program will become either peer helpers or youth volunteers for future implementation in the middle schools.

Key Learning

- Establishing and maintaining high levels of youth participation in suicide prevention activities is enhanced by the meaningfulness of that involvement.
- Youths are capable of and interested in taking on roles critical to the success of suicide prevention activities.
- Different youths can take on a variety of roles in one project, depending on their interests, capabilities, and personal context (high school, out-of-school, college).
- Former participants in program activities such as peer helping can be a valuable resource in training the next generation of youth participants.
- When involving youth in suicide prevention efforts, it often helps to find and involve youth where they are already involved, rather than trying to have them participate as an adult would (such as by being a committee or board member).

SUICIDE AWARENESS EDUCATION

One of the challenges of evaluating seven projects involving the implementation of at least eight different best practice strategies was that when planning and doing the suicide prevention work communities did not necessarily do things in a way that could tidily be fitted into one best practice strategy or another. The activities overlapped. They were different in some ways from those described in the manual. And the people in the communities described them using different language and alternative names. This was particularly the case for those activities that came to be labelled suicide awareness education, which appeared to encompass any form of presentation, meeting, promotional material (brochures, posters), public event or short-duration training activity related to suicide or suicide prevention. The manual emphasizes suicide awareness education for youths in the classroom and school. Yet this distinction about the location and population towards whom the activity should be addressed was challenged repeatedly in the projects.

Was this simply an overlap with broad-based community development activities? Certainly the suicide awareness education activities had that impact and in many cases, that intent. Like youth participation, community development is a best practice that can not be implemented in isolation — it can only be implemented through the kinds of activity encompassed by the other best practice strategies. Yet it is also a goal in itself, and a process necessary for the implementation of other best practice strategies.

Many of the suicide awareness education activities undertaken by the projects could be considered stepping-stones to other best practices. These consisted of information meetings held with individual organizations (including service agencies, schools and school district officials, government organizations, band councils, and parent advisory groups) and public meetings with

representatives of agencies and other interested individuals. In several cases (such as Williams Lake and Prince Rupert), public consultation processes were undertaken — usually through community or agency surveys — which addressed needs related to suicide and suicide prevention information, gatekeeper training and system-wide protocols. This highlights the interactive nature of suicide awareness education activities in the projects. They did not just share information, but obtained it from community partners as well.

The information obtained through consultation, meetings and project development was used to link activities with other prevention activities in communities, some of which were focused on suicide prevention, but many of which addressed broader topics such as alcohol and drug use and violence. Many project participants saw this connection to broader prevention issues as key to the long-term sustainability of suicide prevention efforts in their communities.

Information gathered was also used to support other best practice strategy activities such as gatekeeper training and system-wide protocol development. Gatekeeper training and peer helping both rely on current information about community resources. Protocols depend on an interactive and ongoing exchange of information, and the projects used diverse approaches to developing information-sharing agreements and processes.

One interesting aspect of how suicide awareness education overlapped with other best practices was how several projects treated information sessions as short duration gatekeeper training. Many of the best practice activities focus on three emphases — information about suicide, skill development, and attitudes related to helping a youth at risk. While information sessions understandably had a focus on the information and attitudes about supporting others, most also addressed skills by sharing information about warning signs related to youth suicide, and the need to be direct in addressing and assessing risk — 'asking the question'. In part this emphasis was intended to spread basic helping information to as many people as possible, but it was also a way of advertising the potential value of more comprehensive information available through gatekeeper training. The dual role of information sharing and promotion was apparent in virtually all projects, and most of the suicide awareness education activities undertaken.

One situation that emphasized suicide awareness education as an end in itself was the preliminary work by the suicide prevention committee in Dease Lake as they put together their brochure and designed their peer helping initiative. Part of their goal was to simply raise awareness of the issue in the community, and address the apparent reluctance of many in the First Nations community about the need to talk about the suicides and work through the grieving process. Several individuals described it as 'naming the elephant that was in the room' — meaning that the suicides were obvious and had a deep impact on community members, but that people were not discussing what to do about them. Simply having a suicide prevention committee that kept bringing the issue to various agendas across the community helped to make it all right to discuss, deal with, and face clearly. A wide range of community members spoke strongly and with gratitude to the committee for not allowing the topic to be buried. They spoke of reduced community tensions, a feeling among community members that there were

people thinking about the problem of youth suicide and working to do something about it, and that people had somewhere to go to talk about the issue if they needed to. The committee's existence provided legitimacy to prevention as a goal, and permission to discuss the issue openly and constructively.

In Williams Lake, the numerous meetings and presentations to agencies and public groups highlighted the lengthy time and iterative process that can be necessary in developing a community-wide approach that addresses issues on several fronts. Meetings with stakeholders (including school administrators, agency representatives, and other interest groups) often were combined with basic information about suicide and suicide prevention, and were targeted to achieving broader consensus about the need for gatekeeper training and system-wide protocols. The process continued over the course of the year, and is not yet complete. Part of the community strategy is to build on the information sessions so that each 'iteration' encompasses a more detailed and comprehensive approach to disseminating information and building skills among community members.

It is tempting to look at what was classified by the projects as suicide awareness education and want to create a new focal point for action that might be called "community suicide awareness information" — something that focuses on the community context and information sharing aspects of the activities. Alternatively, we could easily argue that the suicide awareness activities are already accounted for through best practices such as community development, community gatekeeper training and system-wide protocol development. Either way, including and talking about these activities expands our understanding of the processes involved in implementing a community-wide approach to youth suicide prevention — how activities relate to one another, build on previous endeavours, reinforce goals and practices, and are difficult to understand in isolation.

Key Learning

- Suicide awareness education can be a two-way, interactive process that involves both imparting and collecting information, thus contributing to such strategies as developing system-wide protocols and documenting resources for peer helping and gatekeeper training. This development occurs in two ways; 1) as a complement to information provided in other contexts, and 2) as a stepping stone to other activities.
- The most effective suicide awareness education focuses on information, attitudes and skills, and provides one aspect — and perhaps a starting point — for a broader approach involving other strategies that are able to emphasize the skill component more completely.
- Suicide awareness education in schools and in the community can be a valuable end in itself — representing the most broad brushstroke approach to disseminating current information to a high number of people.
- The seven projects consistently employed an approach that emphasized suicide awareness education in both communities and schools, and involving youth, service providers and the public.

SCHOOL & COMMUNITY GATEKEEPER TRAINING

In the manual, the key differences between training for gatekeepers in the community compared to those in schools are 1) the

nature of the typical relationships of gatekeepers and young people, and 2) that community gatekeepers are less likely to have a mandate or skills for assessment and intervention, and so the emphasis is more clearly on early identification and referral to helping resources. In practice, the project sites that introduced gatekeeper training did not emphasize this distinction. They actively endeavoured to minimize the differences between training for those in school and community settings, and tried to structure the delivery to maximize interaction between school and community representatives.

Yet in setting up gatekeeper training for school personnel, many communities took advantage of an alternative delivery model that accommodated the schedules of teachers and others in the school system. The most common gatekeeper training approach used by the projects was the "Living Works" model. The most common alternative was the "Ask-Assess-Act" school gatekeeper training program developed in British Columbia by the BC Council for Families as a one-day alternative to the two-day Living Works program. Ask-Assess-Act is based on the Living Works model. The Ask-Assess-Act training was a good fit for teachers who were able to devote single professional day sessions to a training program of this nature. In practice, many representatives of the schools did take part in the two-day Living Works workshops — particularly school counsellors — and other community members participated in the Ask-Assess-Act training.

There were several benefits to having school and community representatives undertake the training together (or even training based on the same model). When dealing with specific crisis and referral situations, the two groups had developed — through the training — a shared understanding of potential problems and issues, they used similar and compatible models and language, and in many cases had developed personal knowledge and relationships with community partners that enhanced their ability to provide support. Having the training delivered to both groups concurrently also contributed to higher levels of understanding and awareness of the different work contexts, challenges and priorities that school staff and those in community organizations faced.

All of the projects that included gatekeeper training as part of their strategic activities indicated that the training was well attended and well received by those taking part. The impacts described by the sites went beyond the perceived value of the information and skill development that the training was designed to impart. Most mentioned such benefits of the training as:

- Facilitating interaction and improved working relationships among community agencies, and particularly between school and community representatives;
- Promoting the value of suicide prevention more generally in the community, and expanding perceptions of the range of resources available; and
- Actively contributing to the development and articulation of system-wide protocols and school policies.

While five of the seven project communities included gatekeeper training as part of their project activities, Quesnel in particular had an apparently unique situation, which provided a considerable research opportunity. As noted earlier in the report, Quesnel has had over 350 people take part in gatekeeper training over the past five years. A two-day Living Works workshop has been

held between one and three times a year since 1995. As part of the community's participation in the project, the two individuals conducting the workshops, who had been long-time community residents and had taken the week-long 'train-the-trainer' Living Works program, undertook a follow-up survey of past participants in their training sessions. Forty-nine telephone interviews were completed in August 2000.

The survey respondents were 82% female, had a mean and median age of 42, and represented a variety of work situations, including community services (32%), the school system (20%), private sector organizations and government (15% each), and the health care system (12%). Two thirds of respondents had been a helper to someone in crisis since they took the training, and over a quarter had done so more than five times.

The survey asked the gatekeepers a variety of questions about what they remembered from the workshop, what parts of it were most useful, and it included a retrospective self-assessment of five categories of gatekeepers' skills. Respondents were asked to estimate their skills at three points in time — prior to the workshop, immediately after the workshop, and at the time of the survey. Both Quesnel and the Powell River project used a comparable set of questions as a post-workshop survey, and this did not include the third time period. Not surprisingly, those who had been a helper to someone since they took the gatekeeper training were more likely to state that their skill levels had increased or stayed the same. In both communities gatekeepers indicated a significant increase in skill levels between pre- and post-training. In Quesnel, the highest changes were noted in the categories 'skill in assessing risk of suicide' and 'skill in intervening,' and high pre-workshop self-ratings for 'ability to recognize warning signs' and 'awareness of community resources' (**Figure One**). 'Comfort in talking about suicide' showed strong increases immediately after the workshop as well as afterwards, and higher for those who had helped someone at risk. In general, most respondents indicated that their skills had either maintained or increased in the time since they had taken the training, particularly those who had helped a person in crisis during that period.

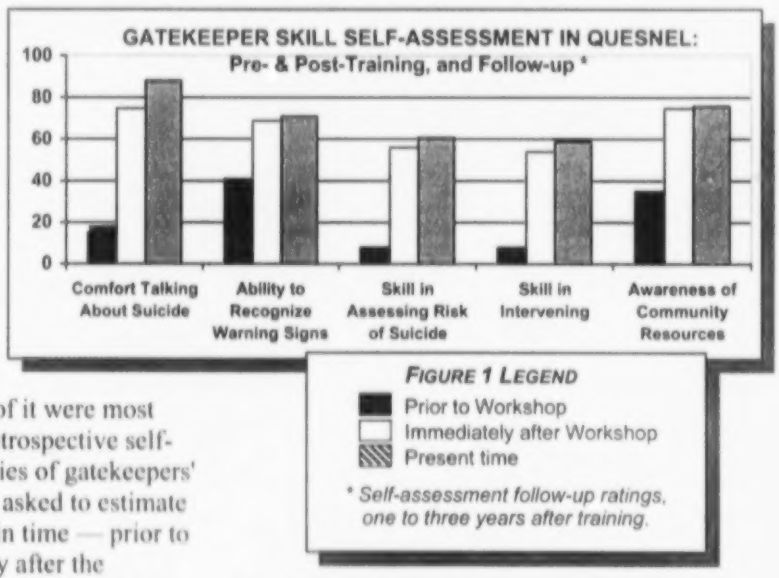

Table Five shows the percentage of respondents who indicated a decline in their self-assessed skill levels since the workshop until the present for each of the five skill and knowledge areas. Again, those who had been a helper to someone at risk were less likely to have indicated a decline.

Several of the interviews with project staff raised the issue of the need for gatekeeper

training or suicide awareness information to be a long-term and repeated activity. They argued that potential gatekeepers needed to have these skills refreshed from time to time — much in the way that people regularly take refreshers of First Aid training. Some school and community members contacted by the sites about possible gatekeeper training responded with such statements as "I've done that, I don't need it any more." The project workers then provided information about what the training (or other information session) would involve, and some of these people would reconsider. In the Quesnel survey, 87% of respondents indicated that they would be interested in a refresher if it was offered, and another 7% suggested that they might be interested if the refresher was targeted to their needs. **Table Six** describes the percent of respondents to the follow-up survey who indicated that a refresher related to a specific skill or knowledge would be helpful.

TABLE FIVE

GATEKEEPER SKILL RETENTION IN QUESNEL:
Percent Reporting a Decline in Skills Since Training *

Skill / Knowledge statement	Percent
1. Skill in assessing someone's risk of suicide	23%
2. Skill in intervening with a person at risk of suicide	21%
3. Ability to recognize warning signs of suicide	17%
4. Awareness of suicide-related community resources	17%
5. Comfort level talking about suicide	8%

* *Percent of gatekeepers who indicated that their present skill or ability level was lower than immediately after the workshop, based on follow-up between one and three years post-training.*

Gatekeepers in Quesnel and Powell River indicated that a very powerful part of their training experience were the role-plays and experiential and interactive parts of the training. They focused on the skill acquisition, and how the repetition and practice helped both the learning and the retention of the information. This finding is very consistent with the experience of youths who were involved in peer helping and generic skill-building training programs.

Key Learning

- The Quesnel project clearly demonstrated the value of an approach that aimed to saturate the local area with gatekeepers. The proportion of service providers and potential gatekeepers who had taken the training was higher than in any other project community, yet demand for the training remained high.

TABLE SIX

GATEKEEPER REFRESHER IN QUESNEL:
Percent Indicating a Refresher Would be Helpful *

Skill / Knowledge statement	Percent
1. Skill in intervening with a person at risk of suicide	73%
2. Skill in assessing someone's risk of suicide	71%
3. Ability to recognize warning signs of suicide	65%
4. Comfort level talking about suicide	58%
5. Awareness of suicide-related community resources	46%

* *Percent of individuals who had previously taken gatekeeper training who indicated that a refresher related to a specific skill or knowledge would be helpful. (n=49)*

- Those who have taken gatekeeper training expressed overwhelming interest in taking a 'refresher' — particularly to update skills related to risk assessment and intervention. An approach that treats skills and knowledge about suicide as something similar to first aid training would appear worthwhile.

- In practice the project sites did not make a strong distinction between school and community gatekeeper training. In part this reflected their emphasis on using the gatekeeper training as a community development tool to link school staff with those in government and community agencies. This proved to be a useful and valuable development process for several communities.
- As a support to local community development, gatekeeper training was provided in many different formats. In some cases it was hard to distinguish from a lengthy suicide awareness education session. The key for the projects was making it fit the time and needs of potential gatekeepers, and giving them reason to come back for a more substantial training session.
- Providing different formats of gatekeeper training — such as the Ask-Assess-Act sessions that fit well with school professional development opportunities helped in two ways. It ensured that more people were able to take the training, and it increased the level of interaction between those working in different sectors, thus giving people direct contacts and shared language and understanding of the issues in youth suicide prevention.
- Follow-up and post-workshop surveys in Powell River and Quesnel identified the value of role-plays and experiential learning. Information sharing should be accompanied with skill development opportunities.
- In summary, gatekeeper training was considered useful and beneficial in all of the communities that implemented it, and gatekeepers indicated increases in knowledge, attitudes and skills associated with successful assessment and intervention for at-risk youth.

SYSTEM-WIDE PROTOCOLS

Three project communities — Powell River, Quesnel and Williams Lake — actively worked on developing and revising system-wide protocols as parts of their projects. Members of the Prince Rupert steering committee and lead agency contributed to the development of both protocols and school policies over the project time span, but this work was not 'officially' part of their project plan. Of the original three, Powell River came the closest to completing the development process, although key tests for the community protocol were to be continued in the fall of 2000.

It became very clear in examining the protocol development work that went on in the three communities that this must be a long term endeavour, and that a one-year time limit for trying to undertake it was unrealistic and potentially counter-productive. Developing a system-wide protocol is a community development process with a clearly 'political' dimension. Its success depends on having the right people at the table, doing the groundwork to establish buy-in among community players, and setting up a realistic and achievable process. In competing for priority among a plethora of community issues, protocol development benefits from having the issue of youth suicide high on the public agenda. Regrettably, it is often a tragic situation that raises the issue's community profile. This was the case in the Quesnel project.

The Quesnel project was making very slow progress in developing its system-wide protocol when the Children's Commissioner requested that the hospital develop a hospital protocol in the wake of the death by alcohol poisoning of a Terrace youth who had been discharged by both the Terrace and Quesnel hospitals. The hospital worked with the

chair of the suicide prevention committee, who was employed by the Ministry for Children and Families, to develop the hospital-specific protocol in draft form. This addressed one of the challenges previously experienced by the project committee — maintaining a significant presence on the committee by members of the health system, without whom the development of a system-wide protocol would be extremely difficult. The external imposition of the limited protocol requirement contributed to that first stage success, but further efforts to expand the protocol will depend on continued participation by health care workers, as well as continued progress in implementing the limited protocol that was developed. Recent hospital staffing and labour issues have made it difficult to offer the training component of the protocol that has been developed, although the draft protocol has been shared with hospital staff. Early indications are that the hospital protocol is being adhered to and has proven useful.

The process for system-wide protocol development that has taken place in Quesnel was mirrored in other projects in two ways. One was the process of developing a limited protocol that covered key organizations — in Quesnel, the hospital and MCF, and in Powell River, the hospital, Youth & Family Services and Adult Mental Health Services. This phased-in approach to developing the system-wide protocol allowed progress and incremental steps to be made and built upon. The second process involved working with all of the community partners to develop and understand their internal protocols, in order to draw from them and build a consensus approach to what works and what needs to be done. Williams Lake emphasized the latter approach, and found it to be both painstaking and slow, although the progress made was apparently worthwhile.

In all three communities it was difficult to maintain momentum when waiting for input from a large number of organizations. When representatives missed meetings then the whole process could be affected, particularly when meetings were typically once every three or four weeks. In the situations where a more limited protocol was developed and then built on by a committee with wider representation, the basics of the protocol development proceeded more quickly, and were less subject to delays and committee turnover. The cost to developing and building on a limited protocol appeared to be a political one — several individuals noted the importance of making sure those involved in developing the initial protocol were both the right organizations and the right people in them. In all three communities the hospital and MCF were deemed core members of any protocol development, and the school system almost as high on the list, although most schools already do have internal policies in place.

The role of a system-wide protocol in gatekeeper training was identified clearly in the project sites. Part of the gatekeeper training for all of the communities that provided it involved sharing information about community resources and referral possibilities. This information was usually developed by the individuals providing the training, based on consultation with local community organizations. Having a protocol in place makes this information easier to develop, and ensures a higher level of accuracy for the information as well. Indeed, gatekeeper training can represent a good opportunity to conduct training about the protocol for members of different community organizations, and to test the fit of the protocol with individual organization protocols and policies as well.

The individuals who developed and deliver the Ask-Assess-Act gatekeeper training require all schools in which they conduct the workshop to supply them with an updated copy of their school policy — in part to ensure it exists, and in part to use as part of the training. This challenges schools to keep their policies current and accurate, and helps to ensure that development work occurs to link policies to system-wide protocols.

The project communities focused on crisis response protocols and not those relating to sudden death or post-vention, although that was a consideration in development work. The goals of a 'referral' protocol are to reduce inappropriate referrals, increase local awareness of processes, organizations and their mandates, and improve the efficiency with which organizations work together to coordinate on case management and hand off clients and information to one another. In developing the protocols, the project communities had to deal with and resolve different information protocols between organizations, as well as legal requirements about client confidentiality. System-wide protocol development had a potentially broad impact on community services.

In order to examine existing processes and develop their protocols, communities examined case studies, examples in which the existing system did and did not work effectively, and invited such experts as local coroners to contribute examples that could highlight potential problems in coordination among agencies. Such examples proved to greatly simplify the process of developing what could have been a quite abstract picture of local programs and services, and were a useful step in articulating the protocol for sharing with others. Several project communities shared drafts and examples of protocols while they were in-process — and all suggested that having an inventory of protocols from different communities would be extremely useful. While each community protocol is by definition unique — no other community has the same specific organizations, history of responsibility, or problem context to deal with — there are some consistent themes that emerge in examining multiple protocols. These themes include which organizations are involved, how information is shared and limitations on involvement.
The projects described the process of developing a protocol as not just long-term, but ongoing. After working on their protocols, the communities discussed their goal as developing 'living documents' that would not simply sit on a shelf somewhere until someone began to re-examine the issue in a few years. They wanted the protocols to be actively used, debated, updated and communicated among community organizations, and part of the process in developing the protocols was figuring out how they would be reviewed over time, and by whom.

Key Learning

- Protocols take time to develop. They can begin with a working agreement between two or more organizations, and then grow to encompass others involved with making or fielding referrals or providing services. Developing a protocol is about relationship building among a group of committed stakeholders, and involves a large number of very small and often painstaking steps.
- The use of case studies and examples is a fundamental element of developing and evaluating a protocol. Resources such as after-the-fact reviews of successful and unsuccessful referrals, and involving coroners in reviewing cases can be very worthwhile.

- Protocols exist as a means of identifying appropriate processes both between agencies and within them. This is particularly apparent in how protocols are disseminated and used in training. Developing a protocol can involve making an organization's inner processes public, and this must be taken into account in the expectations that organizations have of one another.
- There is no one right way to do a protocol. It is a living document and process that reflects the uniqueness of each community. However, communities face common experiences, processes and problems, and these can be shared, as can examples of successful protocols from other communities. There is a role for a central clearinghouse that can articulate and share such examples. Perhaps a web-site or list-serve at SPIRC could help with this process.
- It is important to take advantage of opportunities that arise when developing a protocol. This can be publicity that happens when a referral process does not work correctly, or when a life is saved thanks to a connection that worked well. External catalysts can provide effective stimulation to bringing organizations together to either create or update a system-wide protocol.
- Protocol development does not end when a document is developed — the development must involve ongoing processes for keeping the protocol up-to-date and sharing it with stakeholders. Setting up standing committees, and using such techniques as dating protocols so that everyone knows whether they have the current one can contribute to this.

COMMUNITY DEVELOPMENT

It was noted earlier that the youth participation and community development strategies could only be implemented through other best practice strategies and activities — they might best be understood as means by which other objectives can be addressed and implemented. Most of the communities involved with *Putting Best Practices into Action* already had suicide prevention committees and planned prevention activities prior to submitting their project proposals. The proposals needed to focus on some aspects of the fifteen best practice strategies, but the local committee chose the priorities to be addressed. And the projects all involved using local resources, building on prior efforts, and working towards sustainability — all aspects of a broad-based community development approach.

While it could be argued that all of the projects and activities undertaken were in some way community development focused, four of the projects specifically targeted their efforts using a community development model — Prince Rupert, Richmond, Stikine Region and Williams Lake. Indeed, many of the strategies such as system-wide protocol development are hard to conceive outside of a community development approach.

A finding that each of the communities reflected upon in some way was that project funding helped community members to take a step from crisis response toward true prevention work. Most communities had undertaken some prevention activities prior to the project, but they also experienced difficulty in maintaining that focus in the face of ongoing needs to deal with crisis situations and often under-staffed services. The project funding helped them maintain

their prevention focus in the face of competing priorities. This was particularly important for several communities that had become determined to focus on prevention because they came to view a strictly crisis-response and post-vention approach as leading to long-term burnout and ever higher caseloads.

The emphasis on a multiple strategy approach also contributed to the community development impacts experienced by the projects. As communities implemented a variety of project activities, the efforts to coordinate across a wide group of stakeholders built networks and improved communications among organizations. And with tight time frames and a variety of project activities, project implementation teams in many cases needed to combine activities to make them doable. So for example, several communities used suicide awareness education sessions to promote and gather information relevant to gatekeeper training and protocol development. Others used youth participation in a variety of settings as a way of investing in the future, and broadening the local resources available to contribute time and effort to ensuring project success.

Projects faced diverse community development challenges in implementing project activities. Coping with them contributed to the lessons learned.

Turnover of committee members, project leadership, and staff: Every project experienced transition among its project team and the people involved in implementing key activities. Communities coped with this in a variety of ways — some simply replacing departed team members, others reallocating responsibilities among those who remained. Replacing team members occasionally led to changes in direction for projects, as new visions and interpretations of project goals ensued, and some continuity of activities was lost. Reallocating responsibilities in many cases led to burnout among project workers — many of whom were volunteers, or doing the project "off the sides of their desks." Indeed, there were many variations of the phrase used by those interviewed for the project — off the sides of desks, off the corner of their desks, and even off the edge of the corner of their desks.

Multiple strategies in isolation: Another source of burnout for project team members was trying to undertake activities in isolation rather than coordinating efforts. The Williams Lake project in particular, with three separate sub-committees addressing project goals, would have benefited from examining the crossover between efforts to plan gatekeeper training and develop system-wide protocols. Committee membership declined towards the end of the project, and one contributing factor was the intense level of effort expended in a short period of time in trying to meet project timelines.

Multiple strategies and realistic objectives: In trying to address as many best practice strategies as possible, most projects set their sights too high. While most of the best practices complement one another in how they can be implemented, some — such as developing a system-wide protocol and implementing a peer helping program — have less opportunities for crossover, and are time and labour intensive. With limited local resources and predominantly volunteer committees and participants, communities were stretched in trying to move ahead on several fronts at one time.

Communities used a variety of approaches to address the challenges faced, and to

develop their communities in what they hoped would become sustainable in the long-term.

Compromise: With committees composed of representatives of diverse organizations with varied mandates and organizational cultures, it was sometimes difficult to do such simple tasks as arranging meetings that could be attended by all. Some participants were volunteers, while others could treat their participation as an extension of the work they normally undertook in their jobs. A variety of approaches were employed across the projects, including:

- Changing the location of meetings to take them to those with the most difficulty in attending — on-site in hospitals, First Nations band offices, and school districts.
- Adjusting the timing of meetings in various ways — ensuring that they are regularly held at a consistent time to help planning; making meetings flexible to ensure that meetings were only held when necessary; adjusting the process so that they could be conducted as conference calls on short notice.
- Using flexibility to ensure that those whose participation was deemed most necessary had maximal opportunity for participating — being aware of alternative schedules, competing commitments and practical deadlines.

Multiple strategies — doing more with less: Most projects used the multiple strategy approach to good effect, having youth participate to contribute to project implementation, having suicide awareness education sessions and system-wide protocol development work contribute to having information on community resources needed for such strategies as gatekeeper training. This achieved multiple goals; it made it possible to do more with fewer participants, it broadened the visibility of projects across the community, strategies reinforced one another so that sustainability was enhanced, and it allowed projects to fit their activities into other prevention and development efforts occurring in their communities.

Expanding resources — other communities: One of the key successes of the *Putting Best Practices into Action* project was the way that the seven participating communities were able to draw on one another as resources and support for project activities. This support included sharing curriculum, data collection instruments, draft protocols and policies, information on implementation successes and problems, and generally problem-solving with one another. Understanding that there were other communities facing the same challenges was a key learning, particularly when coupled with the opportunity to share that learning.

Some of the community development successes achieved in the seven projects included:

Training and skill development: All of the communities expanded the range of knowledge and skills related to suicide prevention far beyond their existing committees. Gatekeeper training, suicide awareness education sessions, protocol development and meetings with service providers all contributed to a higher local skill base of individuals who could potentially intervene with a youth at risk, or eventually take on a leadership role in further prevention activities.

Building upon community strengths: Because the projects built upon strengths and already existing activities and community relationships, the likelihood of project sustainability has been enhanced.

Most project activities were considered appropriate by those within the communities and there was broad consensus on the value of directions taken and results achieved.

Involving First Nations communities: Several communities changed their intended approaches to dealing with First Nations suicide prevention issues over the course of the projects and subsequent to their completion. Initial stated goals included introducing 'culturally sensitive and relevant' resource materials for First Nations community members. While this remained a broad goal, the process was amended to include developing local skills and knowledge so that those within First Nations communities could adapt materials and workshops as they felt appropriate, and also deliver that information locally as well.

Self reliance: The legitimacy brought by participating as a demonstration site contributed to a high level of success in local fund raising and development of in-kind contributions to prevention efforts. The relatively small amounts of resources available through the project funding were usually used to good effect, and they were consistently matched locally at a rate exceeding the minimum requested by SPIRC. Further, communities found numerous opportunities over the course of project implementation to expand on the initial level of in-kind contributions and local resources, building toward a longer-term and sustainable level of funding activities.

Key Learning

- The multiple best practice strategy approach contributed to community development in most situations, but represented a challenge in others. The latter probably reflects the impact of the short one-year time frame of the project, and overly ambitious plans by local committees eager to take advantage of one-time funding.
- The high level of turnover among project leadership, volunteers and even staff members hired specifically for the projects highlights the need to build in redundancy and backups among committee members. Documenting activities well so that lessons learned and successful processes are not lost when turnover occur should be a priority.
- Community development was a major part of all seven projects, whether or not proposals specifically articulated that goal. Training in community development processes and support in addressing implementation issues that arise are important ways that future efforts could be reinforced and enhanced.
- Community development takes time, and the projects were severely challenged to complete the activities they had proposed and to cope with the inevitable roadblocks they experienced along the way, within the one-year time limit. Projects faced challenges that included 1) trying to obtain access to schools that had completed their annual planning before project start up, 2) collapsing curriculum development by youth volunteers into a few months, and adapting that content on-the-fly while still negotiating the duration and content of that curriculum, and 3) trying to achieve buy-in, participation and endorsement of wide-reaching protocols in a political environment.
- The demonstration projects represented a combination of bottom-up and top-down intervention, and balancing community needs and priorities with the need to have the efforts relevant to province-wide

goals was challenging for the communities and SPIRC. Walking the line between supporting specifically targeted initiatives and having communities just do what they wanted to required considerable ongoing negotiation, flexibility on the part of SPIRC, and commitment on the part of participating communities. The benefits to project implementation teams, in terms of broadened resources and support available through other projects made the challenges worth the effort.

4. Process Issues

This report section provides further analysis of the key evaluation issues, based on information collected by the projects, site-specific project reports, and interviews with key informants in all seven projects and in communities not funded through the initiative.

BASIC CONDITIONS FOR SUPPORTING SUCCESSFUL BEST PRACTICE IMPLEMENTATION

TIME: Projects need enough time to undertake planning and implementation, and to fit into work cycles of other organizations such as school districts. The basic assumption of any major initiative needs to be two years rather than one, particularly if effectiveness evaluation is to be built into the activities. While individual strategies may often be implemented within a one-year planning cycle, fitting them into a multiple strategy approach and the planning and work cycles of other organizations usually requires a longer-term perspective.

RESOURCES: Some of the projects benefited from having paid coordinators who could do most of the legwork. There were significant trade-offs for hiring someone — committees in several communities reduced their active involvement assuming that the coordinator would do everything they had been doing, and some continuity with previous and future activities was lost as coordinators were usually hired on a short-term basis. Benefits included allowing more activities to be done, particularly those that a volunteer committee would have difficulty doing, faster implementation of most activities and freeing up committees to do long range planning. Several projects articulated an expectation that in future any paid coordinators hired would be very targeted to specific tasks.

PARTNERSHIP: Many of the best practice activities can be effectively addressed through existing or complementary prevention efforts, including drug and alcohol programs, peer helping programs in schools, and by working with youth in a variety of settings. Others require concerted efforts that are specifically focused on suicide prevention, such as protocol development and gatekeeper training. Having a suicide prevention committee with an ongoing mandate is very helpful, but this can work effectively as a subcommittee of another group with a complementary mandate, such as a Building Blocks committee, Child and Youth Committee (CYC), or a Child Development Centre (CDC).

A further aspect of the need for partnerships was ensuring that certain community organizations maintained a high level of involvement. These included the local hospital (particularly in small communities), the school district, and representatives of MCF.

PUBLIC AWARENESS: The projects demonstrated that a small amount of funding could be quite effective in supporting high profile and well-received local initiatives, and that these initiatives in turn could lead to substantial levels of local investment and funding, and particularly in-kind donations. The public awareness was both a means and an end; it facilitated implementation of project activities and also raised the issue of suicide prevention to a wider audience.

LEADERSHIP: Continuity with previous project activities over time was an issue for many communities, and this often focused

on the continuity of local leadership. Burnout and turnover appears to be high among a group that includes many volunteers who also sit on other committees. There was a strong expression that much of the work was being done "off the sides of peoples' desks," and that even minimal funding could alleviate some of that stress.

PLANNING APPROACHES APPROPRIATE FOR DIFFERENT COMMUNITIES

BALANCING PLANNING AND FLEXIBILITY: The projects repeatedly demonstrated the ability to take advantage of opportunities that arose over the course of the implementation to enhance what they were trying to do. Many of these 'opportunities' were initially problems that were addressed — such as the loss of funding experienced in the Quesnel project and the committee's subsequent success in obtaining in-kind donations that made up for part of that loss. Some of the situations were tragic; youth suicides or suicide attempts that served as a catalyst to community members, increasing public involvement, and rallying people to the projects' efforts. In all such situations committees made decisions to be flexible and role with the flow of events, and to build upon the situation through public awareness or actively broadening the community support base.

COMMITTEE MEMBERSHIP: In smaller communities many of the people on the suicide prevention committees wore many hats, participated on a variety of community efforts and on behalf of several organizations. There was serious danger of burnout among volunteers, and although sympathetic, some workplaces provided minimal support for ongoing participation on committees or for project implementation tasks. On the other hand, the involvement of committee members in other organizations and roles provided some strong benefits in terms of public awareness and access to resources in other organizations.

In Richmond, a discussion arose about the proper level from which to recruit for the advisory committee. Through the development phase it was important to have senior level representation so that processes could be quickly put in place and acted upon decisively. In the longer term, it will be useful to have front-line staff from various agencies represented who can speak to the practical issues of ongoing implementation and adaptation.

LOCAL VS. EXTERNAL INPUTS: Several communities hired coordinators from outside of their community, and this met with mixed success. Local knowledge and awareness of issues, contacts and organizations are important for project success, particularly in short term projects. Similarly, some communities brought in external trainers to conduct gatekeeper workshops and other information sessions. While these efforts brought consistent praise as professional and relevant, the examples in Quesnel and Revelstoke of the benefit of having local trainers who could reach a much wider audience for far less cost stand out.

LINKING WITH OTHER PREVENTION EFFORTS: Such best practice strategies as peer helping programs, generic skill-building and suicide awareness education fit naturally with a variety of other prevention efforts. Those aimed at the broadest mental health promotion interventions for populations and groups (see **Table Two**) were particularly appropriate for inclusion as part of broader programs.

LOCAL SUICIDE PREVENTION COMMITTEES: It is hard to overstate the value of ongoing local suicide prevention committees. They play a significant role in long-term community planning and development, are the repositories of the community's history of activity and successes in addressing prevention issues, provide links to a variety of organizations and resources, and do the hands-on, day-to-day tasks that make things happen. Perhaps most importantly, they represent the best opportunity for long-term continuity of efforts, enabling multi-year planning and a process that builds upon previous effort.

MULTIPLE STRATEGY APPROACH: It is clear that the multiple strategy approach was both embraced and impugned by representatives of the projects. However, the major problem that project committees had with the approach was in trying to undertake too many broad resource-demanding tasks in a short one-year implementation. Shifting to an understanding of how the strategies can build serially rather than only as activities implemented concurrently will address this.

RESPECTING NATURAL CYCLES: Given the danger of burnout among heavily committed and often over-extended volunteers, long-time committee members emphasized the need to respect the natural ebbs and flows of participation in committee activities. They argued that it is important to balance high intensity or short-term efforts with less active periods during which committee members and other volunteers can re-energize for future endeavours. This also allows the committee to be ready to take advantage of opportunities that arise.

HISTORY: One of the key observations made by First Nations members of the projects was the importance of respecting and always reflecting on the impact that history has made on the genesis of a problem. Viewing contemporary problems without that historical lens contributes to introducing solutions that miss the mark, or fall short of their goal.

LEADERSHIP CHARACTERISTICS THAT FACILITATE EFFECTIVE PREVENTION EFFORTS

COORDINATORS VS. VOLUNTEERS: One of the key contrasts examined through the project sites was the relative impact of using the funding resources to hire a short-term coordinator to undertake project activities, or have them done by local committee members. It was possible to examine this issue, although decisions about which activities to undertake were affected by the presence or absence of a coordinator, so there was no instance of two completely comparable implementations with the sole difference being the coordinator status. Coordinators were hired in Prince Rupert, Williams Lake and Richmond, and the Stikine Region project had one of the volunteer suicide prevention committee members take on a part-time coordinator's role part way through the project.

During the project selection process the selection committee expressed concerns about the long-term sustainability of project activities in cases where a coordinator was hired. A conscious decision was made by the committee to make sure that those communities choosing to use a coordinator had strong reasons for doing so, and that thought had been given in the proposal to how the developmental work that would be done by the coordinator could become sustainable over the longer term.

In practice, there were significant trade-offs made by communities concerning the role of

a coordinator. Those communities that did not have a paid coordinator who could do much of the legwork of implementation struggled to make things happen. In all three such communities, project committees and 'volunteer' leaders described the pressures of trying to do the work 'off the sides of their desks' — reflecting the difficulty experienced in finding ways to fit the work into their regular responsibilities. They described 'captured moments' in which they would make phone calls, or use other meetings to share information or solicit participation. Some of these moments came under the guise of doing their existing duties. Yet most individuals contributed substantial amounts of unpaid over-time to the projects. It would be unfair to the organizations in which these individuals were employed to attribute the time-pressure experienced by project participants to an unwillingness to allow staff to devote time to suicide prevention activities. They clearly recognized the value of the work and the participation for the community and also their own organizations. In most cases — particularly in northern and isolated communities — organizational reluctance could be attributed to serious understaffing of positions, meaning that the trade-off was not about who could do the work (usually clinical or client-service in nature), but rather, whether it would get done at all if the suicide prevention participant was not available to do it. There simply were not others available in the organizations who could have work re-distributed to them.

All of these trade-offs were apparent in the views expressed by project representatives and local suicide prevention committee members. Turnover of coordinators was a problem in Prince Rupert, where five part-time people took on the coordinator responsibilities over the life of the project, and the agency manager contributed significantly more time than was initially estimated. In Williams Lake, the coordinator hired was not from the local community, and some steering committee members were concerned that this affected how horizontal linkages were developed over the project. The Richmond coordinator was also not from the local community, however this was viewed as a potential benefit to the project, as it allowed new relationships to be developed that had not previously existed.

The continuity of the coordinator's role was an issue with Prince Rupert and William's Lake (although the final Prince Rupert coordinator is continuing with the project into its next phase). In Richmond, alternative funding has been arranged to establish the coordinator position over the next year, and this has ensured that the suicide prevention emphasis that the project enabled will continue at least that long.

In Williams Lake the impact of losing the coordinator one year into the three year proposed plan appears to potentially have a large impact on how project activities will be implemented over the long term. In this community and in Prince Rupert one of the impacts of having a coordinator was that the volunteer suicide prevention committee — particularly active, dynamic and wide-ranging in membership in both communities — was that committee involvement and active participation in implementation declined over the course of the project. In part this reflected unrealistic expectations that suicide prevention committee members had of the role of the coordinator. Indeed, the coordinators in both communities expressed concern that many committee members expected the coordinator to take over the work that they had been doing up until that point in time. Further, the coordinators felt that they at times were

expected to report to 'thirty bosses', and that there was some confusion about the processes appropriate for overseeing and prioritizing the work that they would undertake. In both communities a supervisor at the agency with which the coordinators' employment contracts were held stepped in to clarify with the suicide prevention committee the process of having a coordinator report logistically to a single individual, while taking broad direction from the committee. In both cases, this person was also on the local suicide prevention committee.

The other factor contributing to the reduction in committee member involvement in the communities was burnout — from trying to take on a large number of project activities (trying to take advantage of the opportunity that having a paid coordinator represented), and stress from having the committees involved in ongoing discussions about the proper directions for the projects to take. The latter was evident as both a consequence and cause of the turnover in staff and volunteers in both Prince Rupert and Williams Lake.

Suicide prevention committee and agency representatives in both communities expressed the view that having a coordinator in and of itself was not the problem. Instead, what the committees would do differently next time is have clarity in roles, responsibilities and reporting relationships established at the beginning of the project, and only hire someone to take on very clearly identified and demarcated activities.

One part of the process that contributed to the confusion about coordinator roles in Williams Lake and Prince Rupert was the nature of the coordinator's contact with SPIRC. In Prince Rupert the person attending the first two SPIRC workshops in Vancouver was a suicide prevention committee chair. In Williams Lake, someone from the committee attended the first meeting, and the coordinator did so for the second and third meetings. In each case communication issues arose because both the coordinator and a committee member were not represented.

LONG-TERM CONTINUITY: The lead person and contact for six of the seven projects changed at some point over the one-year implementation. In several cases this occurred within the first three months of the project. This had an impact on the vision of project activities expressed in the project implementation, and the consistency of that implementation with the activities initially proposed. In two of the seven projects the key individual who coordinated the proposal development was not involved in the project at all, and in two others was not involved beyond the first couple of months of implementation. Yet two of these projects could be considered among the most successful in terms of consistent implementation of a clearly envisioned and articulated set of strategies. What appeared to be as important as the continuity was the clarity of the vision of those who took over project leadership, and the support they obtained from their committees.

LINKAGES: Projects and project leaders made good use of the long-term contacts and linkages among local suicide prevention committee members. Even so, maintaining representation from key organizations was a challenge for most of the projects. The committees used a number of strategies to accommodate those who they needed to be involved — changing meeting times and locations, trying to get back-up representation so that someone from the organization was unlikely to be absent, making work and time demands as

reasonable as possible, and keeping meetings focused and on-topic.
While it was important to the local hospital, MCF and the schools to be involved with each project, it was particularly imperative to have the schools involved in a leadership capacity. The amount of effort and work expended in the projects to try to entice schools to become involved after-the-fact was enormous. This became a key consideration in most projects — ensuring the schools or school district were on-side and actively involved from the beginning, and to have a presence in their planning cycles well in advance of actual intended implementation.

In several projects it became apparent that there were discontinuities between the project linkages to different levels of some organizations. Some emergency units and psychiatric wards of hospitals became involved with the project, but without significant buy-in or support from the rest of the hospital community. Others had community health units involved but not the hospitals directly. Several communities made links to individual schools without a broader contact with the school district, which became problematic when they tried to expand their activities to other schools. Others had good linkages to the school district, but found difficulty in finding participants from individual schools, although this was usually dealt with successfully in time if the school district was on-side with the project.

LEVERAGING ADDITIONAL RESOURCES IN SUPPORT OF SUICIDE PREVENTION

TAKING ADVANTAGE OF OPPORTUNITIES: As part of their original proposals, all projects were required to obtain local matching funding equal to 50% of what they requested from project funding. Most were able to identify more than that amount — usually in the form of in-kind donations. Most projects also were able to locate and use additional sources of local in-kind support through the implementation stage of the project. These included reductions in cost of printing information cards, donations by schools or other partners that would be participating in a specific endeavour (such as First Nations groups that covered the cost of gatekeeper training after it was organized), and fundraising efforts led by youth. Several project representatives described the situation by referencing a line from a film that goes 'if you build it, he will come' — but changing that to 'if you start it, funding will come'. Their point was that it is easier to obtain financial support for something that is under way and in need of specific support than it is to get up-front funding based on future activity.

YOUTH PARTICIPATION: Youth contributed resources to projects in two ways. One was through active fundraising efforts within their communities. This was usually done based on specific tasks or events — such as a youth forum or to fund the printing of a youth information resource card. The other resource contribution was as the hands and feet of project implementation workers — helping to organize and publicize events, develop curriculum and other project materials, and participate in workshops and training. In several projects youth participation was relatively minimal, and the projects suffered for this. In others, youth played a vital role in undertaking project activities, and this helped ensure the relevance of activities for this population, as well as support for sustainable efforts.

LEGITIMACY THROUGH EXTERNAL FUNDING: Relatively small amounts of core funding for a project were levered by

project communities into substantial levels of local support through direct donations and in-kind ones. For northern communities the highest project cost was travel related to the extreme distances and isolation of the north. This situation merits special consideration by government funders.

A survey of nineteen communities that submitted either letters of intent or proposals but were not funded found that most did still continue with some form of suicide prevention activities. Eleven of the nineteen found local funding and undertook some part of the activities proposed to SPIRC. A few of these were able to work out enough funding or in-kind contributions to take on most or all of the proposed activities. Five communities found local and external funding — two from the federal government, and three from provincial organizations — and undertook either the proposed project or a more extensive one than initially proposed. Five communities did not continue with any significant level of suicide prevention activity after their proposal or letter of intent was declined.

Several communities indicated that the process of putting together their proposal or letter of intent helped to organize their group, and contributed to their ability to make long-term plans or apply for funding in other places. Others have found it difficult to maintain their suicide prevention coalition on its own, and so have merged with other groups such as youth outreach or crisis coordination initiatives. These groups have taken a more holistic look at suicide prevention, and managed to keep the issue on the table and part of local discussions.

BUILDING TASKS INTO EXISTING POSITIONS: The lead contact in several communities was a representative from MCF. Several of these individuals had a community development or prevention portfolio as part of their mandates, and thus could realistically take time away from more clinical duties to participate in project development and implementation. Where this was possible, these individuals were well placed to provide leadership and oversee implementation activities by volunteers or hired coordinators. The volume of work and effort made this extremely difficult for those who had to add work to their existing responsibilities without acknowledgement of this as a legitimate activity.

ESTABLISHING LONG-TERM INSTITUTIONAL CONNECTIONS: In several of the communities that were not funded, local resources were tapped by developing relationships with local colleges and other institutions. One of the most successful of these was Chilliwack's AD Rundle "Family of Schools" project, which employed volunteer students from the University-College of the Fraser Valley to deliver their generic skill-building program, while offering students practical experience and credit towards some of their course requirements.

KEY COMMUNITY PARTNERSHIPS FOR PLANNING & IMPLEMENTING SUICIDE PREVENTION

SCHOOLS AND SCHOOL DISTRICTS: The communities that had the schools or school districts involved as a lead organization had a significantly easier time in meeting project timelines and maintaining coordination with all other stakeholders. Those that had either marginal participation by the schools or inconsistent representation from school representatives faced challenging barriers to timely project completion. The schools were not central to all project activities, but all projects had

some aspect of their total implementation that depended on linking with the schools. In Revelstoke, the lead for the project was the school-based prevention worker. This appears to be an extremely suitable locus for organizing suicide prevention activities. Being school-based, prevention workers have ready access to school planning cycles, can fit suicide prevention easily into other prevention approaches, and can focus on what is topical or appropriate. They can also be more outwardly focused on other community agencies than most school staff.

LOCAL HOSPITALS: While not every project had a direct link to activities in the local hospitals, all needed to keep in contact with the hospitals or with community health organizations that handled crisis situations. They contributed to protocol development, provided information relevant to training about local resources, and played an important role in linking to the broader network of physicians and other health care workers in the local areas.

MINISTRY FOR CHILDREN AND FAMILIES: In several communities, MCF staff played a significant role in the project development and implementation. This role was particularly important because clinical staff tend to have the strongest links to individuals in the health care system, and provided a key means of accessing that community and inviting long-term participation. Those in schools and other agencies were less successful in levering participation as broadly, particularly participation by health care and clinical representatives.

A few of the MCF individuals were able to reasonably allocate part of their duties to the more community development oriented aspects of project implementation. However, it was a struggle in all cases, as the trade-off with high clinical caseload levels made this particularly difficult.

LOCAL SERVICE AGENCIES: A variety of multiple-service agencies maintained participation in the projects. Richmond's CHIMO Crisis Services organization was the only one among the seven projects that had a specific focus on suicide and suicide prevention. Canadian Mental Health Association, Youth Centres, Community Health agencies, employment organizations and others participated on suicide prevention committees and in project activities. Other organizations had members participate, but not as 'official' representatives of their organization, but more as a resource to the group, and this often depended on the individual interests or capabilities of the 'volunteer.' These included representatives from policing organizations, private counselling centres, and municipal government groups.

While no two communities had the same list of participating organizations, all had some representation from the non-profit sector, and often these individuals played lead and important roles in project success.

OTHER PREVENTION EFFORTS: Where ever possible, the projects made links to other prevention activities and programs — particularly those dealing with alcohol and drugs, and those based in the schools. There are many as-yet untapped resources in BC communities that are already addressing issues that overlap with suicide prevention, and future coordination with these activities will likely lead to improved efficiencies of efforts as well as more successful sustainability of strategy implementation.

OTHER COMMUNITIES: The other participating communities in the *Putting Best Practices into Action* project became a key resource for most projects. They

provided ongoing support, information, resources, and a forum for sharing implementation challenges and successes. Indeed the linkages between some of the projects appear strong and will likely continue through the next stages of implementation and planning.

LINKAGES TO OTHER RESOURCES: One community, Prince Rupert, developed a web-site for its project, and used the Internet extensively in tracking down information and building project elements. A central web-site for the project was also developed, with links to suicide prevention programs and resources around the world. These were used by some of the communities, yet the direct links to others doing the same activities appears to have been the most useful and interesting aspects of the web connection for the projects. While information and resources are useful to have on-line, having that information well organized and accessible seems to be a key consideration for making it useable.

IMPLEMENTING BEST PRACTICE STRATEGIES SYSTEMATICALLY AND COMPREHENSIVELY

MULTIPLE STRATEGY APPROACH: In many of the communities there was a considerable gap between what was initially conceived and proposed, and what was actually implemented as part of the project. While this was anticipated in that the projects had to adapt the best practice strategies to fit their communities and their particular problems, this divergence also appears to reflect a broader issue that affected other communities that had applied for funding and been turned down. Most projects set their sights too high, and tried to do more than was realistic given the level of resources available, and in particular, the among of time available. The expectation by SPIRC that project activities should employ a multiple strategy approach contributed to this, as most of the projects interpreted this to mean that they needed to apply many of the strategies. Indeed, several of the proposals that were turned down for funding were rejected on the basis that they tried to mention almost all of the fifteen strategies in some way, and were being set up for failure.

In a few communities — notably Williams Lake, Prince Rupert and Quesnel — the pressure to do a variety of activities resulted in less coordination among activities, rather than more. Williams Lake set up three sub-committees, each with a part of the project mandate to oversee. While commitment by committee and sub-committee members was both high and apparent, it was also clear that this put a strain on the amount of work asked of the predominantly volunteer committee. Turnover was high, and the present committee has fewer members than prior to the project, although those who remain have expressed confidence that the group will soon rebuild.

The pressure to undertake too many activities also reflected communities' perceived need to take advantage of the unusual opportunity that obtaining one-time funding represented. Even relatively small amounts of funding were enough to enable diverse project activities, and the project legitimacy that the funding provided made it easier to raise funds and in-kind donations locally. This in turn raised community awareness of the projects, and expectations of what they would be able to accomplish with that funding.

Yet it would be a mistake to portray the multiple strategy approach as inappropriate or ineffective. The evidence from the project sites strongly points to the benefits to project sustainability, strategy

implementation, and overall community development that using the best practices in concert contributed to. The key problem appeared to be the time frame in which communities were attempting to address a wide range of approaches. Most projects interpreted the multiple strategy requirement as meaning the strategies needed to be concurrent. Focusing on how they could be applied serially, or as a broader phased approach to implementation would appear to have strong merit. Indeed, most communities have proceeded with their ongoing efforts in this manner, building on previous work, and expanding as opportunities and resources allow.

Looking at the communities that did not receive funding is particularly instructive here. Of the eleven communities that continued on with some proposed activities with local funding alone, most were not able to use a multiple strategy approach. They addressed aspects of the best practice strategies as they could, in a sometimes haphazard fashion — finding resources for a gatekeeper training workshop in one setting, doing some suicide awareness education in the local school a few months later. Indeed, most of these groups met on a quarterly basis, and tried to plan one or two initiatives a year; most were undertaken in isolation, and the communities found it difficult to build any long-term momentum and sense of continuity among the activities. They were plugging holes, rather than trying to build a solid structure or framework.

INCREASING VISIBILITY OF SUICIDE PREVENTION EFFORTS

FUNDRAISING: There was a reciprocal relationship between fundraising activities and public awareness of suicide prevention activities. The higher the visibility of the local program, the easier it was to raise local funds to help with some part of the activities. Similarly, fundraising activities in several communities were valuable for broadening public awareness about the suicide prevention efforts, and were used to identify possible community partners and potential gatekeepers, and gain information about the range of other and compatible community endeavours. In several communities the efforts to link with other organizations (such as First Nations bands or individual schools), or to support them in developing gatekeeper training lead to identifying additional resources for covering costs, thereby broadening the scope of initiatives and allowing limited resources to make a more significant local impact.

NEWSLETTERS / PUBLICATIONS: Several communities developed newsletters to help spread information about their suicide prevention activities within the community and among specific interest groups such as schools and agencies. Most were developed and organized by youth participants, and few had more than a couple of 'editions' that were distributed. Communities described the process of putting together a newsletter as labour intensive, worthwhile, but ultimately, very difficult to do in a short-term project implementation of a year. Perhaps the most successful newsletter identified was one from a community that was not funded through the project — Chilliwack's *Resiliency Roundup*. This quarterly newsletter is simple but detailed, is informative to a wide range of potential readers, and keeps all involved up-to-date about the progress of the whole endeavour.

At one point there was discussion of developing a newsletter for this project, sharing information among the seven sites. But short time frames and resources made this one of the potential activities received

less priority, and the newsletter never got beyond the planning stage. Yet evidence from projects (funded or not), as well as the well-received newsletters distributed by SIEC (*SIEC Alert*) and SPIRC (*Lifenotes*) make this a potentially worthwhile activity to explore in the future.

MEDIA: While none of the seven projects had an explicit emphasis on media education as one of their best practice elements, several did have opportunity to deal with the media and public relations issues over the course of their efforts. At least one community had recruited a local media person to participate on the steering committee, thereby providing an opportunity for promotion of local activities, and awareness of public relations issues on the part of the local newspaper.

Other communities identified media relations as one area in which they would put more emphasis if they had the project to do over again from the start. By effectively promoting the project through media, as well as working to change the way suicide and suicide prevention issues were portrayed in the media, the project representatives felt that their efforts would have been enhanced; notably fundraising, promotion of 'events' such as community forums or public training workshops, and recruitment of volunteers.

MORE IS MORE, AND THAT'S OK: One of the interesting findings that came out of discussions with project coordinators and suicide prevention committee chairs was a sense that the multiple strategy emphasis contributed to a significantly higher public profile for the projects within their communities. This higher profile was in many ways simply a matter of having something happening at regular intervals — a gatekeeper training workshop, an event of some kind, or a public meeting or with a specific stakeholder group. These all contributed to a wider general awareness that "something was being done" in the community, and in the case of Dease Lake, that awareness in itself appears to have had a strong impact on reducing high public tensions about local suicides and suicide attempts in recent years. The key point they wanted to make was that making the effort to get a group of activities under way was difficult, but that once they were taking place, they gained a certain momentum that generated further interest and support. This awareness facilitated fundraising and promotion of all project activities.

INFORMATION GATHERING AS PUBLIC AWARENESS: It was noted previously that several communities attempted to develop base-line information about community needs and interest in gatekeeper training through agency surveys. While the information gathered was useful, the process of doing the survey was a valuable promotion activity that raised community awareness and facilitated linkages with other community stakeholders.

USING INFORMATION TECHNOLOGIES: One site developed a web-site for local groups interested in obtaining information about the project. While it is not clear how extensively this web-site was accessed, other attempts to link with the various communities using the internet — the central web-site, e-mail, and document sharing using attachments and a download page on the web-site, were used inconsistently. This appears to reflect a wide range of levels of technological capability among communities and agencies. Several local agencies and government organizations had difficulty retrieving attachments of information files. Community agencies often had older equipment and software, and the interest and

capabilities of specific individuals was often the key to how the agency was able to use or take advantage of information technologies. In many communities the main contact or coordinator would instruct SPIRC staff or the evaluator to use their home e-mail addresses for sending messages or attachments, because these machines were often of superior capability to those in the office in which they worked.

PUBLIC EVENTS: In addition to the public information sessions about suicide prevention and specific project activities, several communities developed youth forums, coordinated and facilitated in part by youth, and these generated a great deal of local interest as well as useful contacts and resource connections. Similarly, the gatekeeper training workshops facilitated inter-agency communication and post-workshop coordination on some issues, and also became a public awareness focal point for community suicide prevention efforts.

SUSTAINABILITY OF SUICIDE PREVENTION EFFORTS

Sustainability was an issue that generated a great deal of discussion, thought and anxiety in all of the projects. One of the workshop sessions had a facilitated discussion about sustainability that involved all seven projects, and the issue was also raised in interviews with representatives of all projects as well. Yet how people think about sustainability is not necessarily what they do in trying to promote it, so it is worth comparing the intentions of project members with the actions they undertook to make them happen.

What They Said:

In interviews and in the facilitated session, project participants identified several broad themes that could contribute to project and suicide prevention activity sustainability. The addressed a variety of perceived barriers to sustainability that included lack of resources, geographic isolation and distance, turnover, burnout and changing roles among community volunteers, the availability of supports by central agencies including SPIRC and MCF, and competing agendas among the different stakeholders of suicide prevention locally and provincially.

SUICIDE PREVENTION COMMITTEE / LEADERSHIP: Most project communities mentioned the strength of their suicide prevention committees as constituents of a sustainable prevention presence in their communities. They recommended building strong, stable committees, with broad membership and good leadership. Committees need to have enough people to provide backup, and ties to a range of local resources needed for prevention activities. Most cautioned that there are many activities that need to be done that it is difficult to rely on 'volunteers' for, and so periodic use of a paid coordinator or implementation assistant is warranted. Several communities emphasized that there needs to be someone with a specifically prevention focus in a leadership position, and that's something that is hard to do 'off the sides of their desk.'

LINKING TO BROADER PREVENTION AND COMMUNITY EFFORTS: For several communities, the path to an effective and sustainable suicide prevention committee was by linking to existing and related community efforts. Having the suicide prevention committee as a sub-committee of the CYC, the Building Blocks committee, or the local Child Development Centre meant that they had a consistent meeting opportunity, links to a broader range of issues, information and resources, and the potential to consistently recruit new

members as needed. Several communities also discussed focusing on other prevention efforts — concerning alcohol and drugs, prevention issues within the schools, and general healthy lifestyle approaches. Two project representatives discussed the danger of an approach that was too narrow — that suicide prevention as the only focus would be less sustainable, and difficult to keep high on a local agenda. This was considered to be partly because of how emotional an issue suicide is, and that there is a danger of burnout among volunteers. Further, linking to other prevention efforts is not enough — links need to be made to other community development activities, and other general province-wide programs such as peer helping in the schools.

RESOURCES / RESOURCEFULNESS: Tapping in to diverse local resources was seen as a key element of sustainability by most projects. While most also mentioned applying to and accessing funding for specific projects from federal and provincial sources, the main focus was on local resources as the most necessary for sustaining existing efforts and building new ones. The local resources discussed were not restricted to 'funding', but included a variety of in-kind donations, such as discounts on necessary purchases, space for meetings and working, and time by volunteers and organizations capable of assisting. In some northern and isolated communities one of the most valuable in-kind donations was the use of local vans and buses for transportation to and from public youth forums.

Several communities described local volunteers as their most important resource. They included youth and 'consumer' volunteers in the picture they painted, and spoke of the value of the creativity and energy that youth bring to activities.

When discussing more traditional 'financial' donations, several communities emphasized the value of having any donations as a starting point, and levering a small initial funding for further donations by others. The legitimacy and perceived relevance of prevention activities becomes enhanced with every new stakeholder who's on board. Two projects emphasized the value of critically reflecting on their activities and evaluating them in a public way to help demonstrate the value of their efforts as well as identify new opportunities, needed improvements, and gaps in their broad prevention framework.

COMMUNITY DEVELOPMENT: Various facets of a community development approach were seen by the projects as enhancing sustainability. Key among these was working to have specific components of a broad community approach taken on by local stakeholders and having them take ownership for ongoing implementation. For example, a peer helping or generic skill-building program that incorporates a suicide prevention focus into its curriculum is likely to be maintained over a longer period of time, and with less impact of turnover of teachers or school counsellors. The breadth of community activities was seen as a further benefit to sustainability — if suicide prevention becomes a part of many other community efforts, then it is easier to maintain as part of the public agenda.

CREATIVITY: Several communities mentioned creativity as an important element of sustainability. They mentioned creativity in program and activity design, fundraising, and linking to other community efforts.

VISIBILITY: Keeping a visible presence in the community was discussed by a few projects as a support to sustainability. Using newsletters or public forums to engage

community members in the discussion about how to address youth suicide and suicide prevention will keep it on the public agenda. Having regular meetings to keep touch with what various organizations are doing helps this process, as does ongoing efforts to create information and make it readily available to the public. Communicating the results of activities, including evaluation work, to the general public and to broader constituencies such as professional associations or at conferences enables new ideas to emerge and prevents existing ones from getting lost.

USING A MULTIPLE STRATEGY APPROACH: A multiple strategy approach prevents the issue from becoming too narrow or tied to only one agency. The more organizations and stakeholders involved, the more likely that there will be at least one area in which work is being done, and a visible presence to a system-wide approach.

STARTING EARLY: A few communities discussed working with ever-younger children as a means of improving sustainability. This means broadening the approach beyond 'suicide' to resiliency and generic skill-building, and also building in youth involvement as a long-term strategy.

What They Did:

People involved with the seven demonstration projects did try to accomplish what they advised other communities to do. They were creative in building activities and linking to other community efforts, they used a variety of means for broadening the visibility of their efforts within their communities, they linked to other prevention efforts, although perhaps not as much as they hope to in the future, and for the most part they established broad community coalitions that involved key stakeholders in their efforts. Several communities were broadening their efforts in a next phase to encompass a generic skill-building approach with younger children, and all identified committee development as part of their ongoing plans and priorities. Yet there were a few areas that could be identified as problematic for the committees in their search for sustainable solutions.

COMMITTEE CONTINUITY & LEADERSHIP: There appears to be a natural trade-off and tension between the need to have strong leadership with a clear vision, and spreading the load and responsibility among diverse stakeholders. A strong leader is able to rally many people and resources towards a cause, and can provide the vision that enables long-term efforts to succeed despite turnover, and other impeding events that tend to happen. Yet projects that rely on one strong leader are much more vulnerable to a loss of sustained effort if that leader steps down from the committee or moves to another community. Obviously the best situation is to have a strong and diverse committee that also has strong and ongoing leadership, yet it appears that sustainability may depend more on having a wider range of people who can take on varied leadership roles in local efforts, avoid burnout, and keep it moving.

RESOURCE DEVELOPMENT: The requirement of local matching funding and in-kind donations appeared to be relatively straightforward for communities to achieve. Most exceeded SPIRC's requirements. One community needed to develop further resources because of a financial loss through closure of the agency holding its funds. In such situations, all seven communities were able to identify and build alternative resources to meet needs; this appears to hold a great deal of promise for sustainability.

5. Conclusions

LESSONS LEARNED

As might be expected, some of the best learning occurred in those projects that might be considered, by objective standards, to be the least successful. The challenges faced and addressed by communities were part of the tapestry of best practice implementation that we were most interested in understanding, and as such it is difficult to view the project activities that did not get implemented as failures. Rather, they were steps forward for both the communities and the province — toward understanding what works and what does not. But that success still depends on capturing the learning and making it available to others.

The messages gained from the seven project communities are often straightforward and may seem obvious or intuitive at first glance. Yet the learning has been hard-won, and represents a great deal of inspirational effort by a large and dedicated group of volunteers and community stakeholders.

Over 100 individuals have been involved in implementing program activities, and a further 600 adults have participated in training, educational sessions, or information meetings related to youth suicide prevention in the seven demonstration projects. A conservative estimate of the number of youth directly impacted by the program is close to 6,000; at least that many have been affected indirectly, although it is not possible to estimate such a figure in a meaningful way.

The Best Practices Project in Context

The *"Putting Best Practices into Action"* project was introduced to facilitate British Columbia communities in putting into place programs and activities inspired by the manual of best practices that was published in 1998. The goal was to better understand the challenges faced by communities in putting local programs into place, and to find ways for government (specifically but not exclusively MCF) and SPIRC to support the development of innovative and effective implementations. Part of this meant looking at how different community characteristics contributed to the challenges and solutions they faced.

The manual and the projects were conceived to address before-the-fact interventions using health promotion and early risk identification models. They use *universal* or *selective* interventions — those directed at an entire population or those targeted at subpopulations characterized by some shared risk factor, respectively.[3] In part, the project funding was designed to address one of the main perceived challenges that local communities face — finding the time and resources to shift attention from crisis response activities to those more focused on prevention.

The projects were selected to help examine pragmatic solutions to the issue of youth suicide prevention. Although theoretically grounded, the emphasis has been on implementing and researching in order to better understand how to design, develop and deliver programming that is effective and sustainable in British Columbia communities. The seven pilot projects were chosen not simply on the basis of need, but as representing a cross-section of communities facing significant challenges.

[3] Kalafat, J. (2000). Issues in the Evaluation of Youth Suicide Prevention Initiatives. In T. Joiner & M.D. Rudd (Eds.), *Suicide Science: Expanding the Boundaries*. Boston: Kluwer Academic Publishers. P. 3.

What Was Done?

The seven participating communities implemented eight of the fifteen best practice strategies described in the manual. All of the communities implemented at least five different strategies in some way. Perhaps it would be more accurate to say that they began the implementation of those strategies. On one hand the one-year implementation period was a challenge for most communities, and therefore many activities were begun but not completed within the year. On the other hand, most implementations were intended to be ongoing in some way — the long-term impact was intended to include redoing many project activities annually.

Key Learning

While it is not possible to review all of the key learning identified throughout the report in this conclusion, several observations do stand out for emphasis. One of the first is the strength of impact that a relatively small seed investment can have in promoting a comprehensive and meaningful group of community level suicide prevention activities. These resources legitimate local activities, and are multiplied by local investment of in-kind donations.

A second observation is that the one-year time frame for the phase one projects was too short. The time was too short to complete the implementation of many of the activities; too short to allow the quality and thoroughness of development that communities wanted to invest; too short to fit well with organizational planning cycles, and too short to implement evaluation efforts focused on effectiveness and outcome (distal) impacts. Future implementation of phase two needs to address this need for 'enough time.'

The third observation concerns project leadership — there was a great deal of turnover among project chairs, suicide prevention committee members, and coordinators. This turnover contributed to burnout of remaining participants and challenged the long-term continuity of project activities. While strong leadership and a clear vision of what needs to be done can be powerful inducements to collective action and generating new initiatives, long-term sustainability of projects and suicide prevention activities would appear to be better served by developing stable committees with wide representation and realistic planning goals.

Finally, while it is doubtful that any of the seven communities involved in the suicide prevention project harboured a view that after participating in *"Putting Best Practices into Action"* their prevention work would be done, the reality of implementation would have quickly erased such thoughts. In most communities the participants finished their projects with a longer list of intended activities than when they started. As each part of their community puzzle was put into place, the picture grew larger, and the number of pieces appeared to increase. A strong, if daunting, impact of participation for each of the seven communities is that their understanding of the range of possible and necessary prevention activities in their communities has grown, and now encompasses activities far beyond the scope of their initial goals. While most have embraced these broader goals as part of their long-term plans, some have been humbled by an awareness of how much work still lies ahead for them.

What Works?

Post-training surveys of peer helpers, those taking gatekeeper training, and others

involved with the projects consistently showed high levels of satisfaction with the participation in suicide prevention activities. Most also indicated clear increases in knowledge and appropriate changes in attitudes towards helping an identified person at risk of suicide. These are proximal outcomes,[4] and as such are the first two stages of a more comprehensive range of possible and hoped-for program outcomes that include applying the knowledge or skills obtained, and having the desired impact on program goals.

Two of the projects have started collecting information that could contribute to this broader understanding of program impacts, and this will be reported as information becomes available in the future. Phase two projects will also begin to address outcome issues more systematically than was possible with the phase one implementation.

One of the key elements of successful suicide prevention programs discussed in the literature is the need for skill development and practice related to risk identification among peer helpers and gatekeepers.[5] The data collected from peer helpers and gatekeepers involved with projects in Powell River, Quesnel, Revelstoke and Richmond agreed with this observation — the hands-on and practical side of the training was rated highly by participants immediately after training and after a longer-term follow-up. In Richmond, an extensive survey of school youth also clearly supported the importance of peers as a potential beneficiary of suicide prevention information and training. Peers are the first people youths turn to when experiencing problems or crises.

The multiple best practice strategy approach was both embraced and the subject of concern by those involved with the projects. Most tried to take on too many activities, but still found that working on several fronts at the same time did provide certain efficiencies. Of more importance, activities served to support one another in many ways that were hard to predict in advance of the broader implementation. Suicide awareness education led to requests for gatekeeper training, gatekeeper training depended on the results of system-wide protocol development research, and generic skill-building relied heavily on practical and skill-enhancing input by peer helpers and youth volunteers. Overall, the multiple strategy approach helped increase the visibility of prevention efforts, reinforced community partnerships (by demanding strategic cooperation), and enabled community development impacts that may reach far beyond the initial target of the suicide prevention projects.

The projects demonstrated the value of linking suicide prevention efforts with other concurrent community development and prevention activities. Not only can such activities be more efficiently implemented in the short-term, they also have a higher probability of long-term sustainability.

Finally, and perhaps most importantly, several of the communities noted the power of simply bringing youth suicide into the open as a topic appropriate for public discussion. Giving people 'permission' to discuss suicide — something that virtually any of the best practice strategies can contribute to — can reduce tensions, facilitate communication, and help young people get the help they need. The process of facing suicide for a community thus appears to be very similar to what we know works for an individual. Asking the

[4] Ibid, P.5.

[5] Kalafat, J. and Neigher, W. (1991). Experimental and Pragmatic Approaches to the Incidence of Adolescent Suicide. *Evaluation and Program Planning*, 14: 379.

question and facing suicide directly does not increase the likelihood of its incidence — it decreases it.

Evaluation — Some Final Thoughts

This evaluation focused primarily on process issues — how to improve the projects and learn better ways to implement the best practices in other communities. Yet meeting effectiveness and impact evaluation goals is possible with longer-term program implementations, and is clearly appropriate. Such an approach can help us understand how people are applying the knowledge, skills and attitude changes they have gained through participating in project activities, and whether the level of youth suicide or suicidal behaviours has decreased.

In the course of the evaluation, several communities did try to examine distal measures in a broad way. In Quesnel there has not been a completed youth suicide in over four years — roughly corresponding to the time period over which they have been implementing their intensive community-based gatekeeper training program. In Dease Lake, the community has shown a marked decrease in tensions and has not had a youth suicide in over a year and a half — something that local people are at least partly attributing to the work of the suicide prevention committee. However, we also know that because suicide is such a low base-rate phenomenon, it would be unfair to either blame a program for any suicides that occurred in a community in the short-term or to take credit for outcomes that more properly reflect a wide range of community endeavours, commitments and actions, of which the suicide prevention projects were one (albeit important) part.

Yet the Quesnel example is an important case in point. The community's gatekeeper training approach has been going on for over five years, it has resulted in training for over 350 people, and has clearly raised community awareness of suicide issues. Such a long-term approach lends itself more credibly to an examination of distal outcomes such as a reduction in suicide rates. Yet even here, a more reasonable community-level approach would look at suicide attempts instead. However, in all of the communities taking part in the project — indeed apparently in most British Columbia communities — there are significant inconsistencies in how attempted suicides are recorded. These inconsistencies are reflected between and within communities, and even within organizations such as hospitals. Hospital admission databases and separation data do not consistently code suicide attempts as such, and such cases as drug overdoses may have been deliberate but are not necessarily identified as such. The whole area of developing a consistent approach to identifying and recording suicide attempts is one in need of leadership and priority. This would help communities to better identify youth at risk of suicide. It would also facilitate more accurate research and evaluation of community and province-level program impacts.

In the long run, our research and evaluation efforts need to be clearly focused on the broadest goals of the suicide prevention efforts — reducing the level of suicide and suicidal behaviours of youth in British Columbia communities.

Next Steps — Key Points to Consider

This report has examined diverse program implementations involving many stakeholders. Following are a series of key points for MCF and SPIRC to consider when developing and supporting future community suicide prevention initiatives.

POINTS FOR CONSIDERATION: IMPLEMENTING BEST PRACTICE STRATEGIES

This section offers key ideas for consideration by the Ministry for Children and Families and SPIRC regarding future support of best practice strategy implementation. Most points could easily be directed at both organizations, although some reflect concerns specific to one or the other organization.

Following this section is a further set of points targeted to the Phase Two implementation of the *"Putting Best Practices into Action"* project. These ideas are directed to SPIRC and to the specific projects that will be involved in further suicide prevention activities.

SOME THOUGHTS ON RESOURCE ISSUES: It is clear from the seven demonstration site communities that relatively small amounts of funding can be translated into meaningful and highly visible prevention efforts. The requirement for community matching of a portion of funding was useful, and all communities were able to at least match expectations and in most cases exceed them.

An approach that emphasizes targeted seed funding rather than the development and implementation of a broader 'program' appears to remain beneficial. On one hand such efforts can clearly translate into longer-term and community-wide efforts; on the other, the approach facilitates relevant and community-specific efforts rather than one-size-fits-all solutions.

An issue related to resources is timing — the development work for curriculum tends to be labour and resource intensive, but longer-term implementation can require substantially fewer resources. A seed funding approach needs to be flexible enough to accommodate longer duration implementations than one year. Gaining access to community partners such as schools and school districts means being able to fit into their planning cycles at opportune times, and at a minimum this would appear to demand a two-year implementation in the majority of cases.

SUPPORTING LOCAL CONTROL OVER GATEKEEPER TRAINING: The level of saturation of gatekeeper training in Quesnel was unusual compared to other communities across British Columbia. Yet even here the level of penetration into institutions such as the schools was not as high as that recommended in the manual of best practices. Not all teachers have taken part in the gatekeeper training, and neither have many school administrators. Demand for the training in the city remains high. The Quesnel community has benefited from having local people take a train-the-trainer workshop and provide training regularly at a small cost to the community and participants.

While the cost of bringing external trainers to local communities is not exorbitant, it is still out of reach for most communities to accomplish beyond a small core of community service providers. A further benefit of developing local trainers is the additional relevance that training will have for First Nations groups interested in adapting culturally sensitive and appropriate content for the training in their communities.

RESPECTING FIRST NATIONS' COMMUNITY-BASED APPROACHES: The peer helping approach employed in the Stikine Region was unique and initially counter-intuitive to some of the participants in other projects and staff at SPIRC. Yet once the activity was introduced and

discussed in more detail, it provided a rich learning situation about the needs of First Nations communities in the north and the potential inherent in adapting strategies initially designed for different contexts. Without the patience and opportunity to 'see what would happen,' the project would have taken a different path and this learning situation would have been lost.

DEVELOPING LEADERSHIP: One way that local leadership emerges with respect to an issue such as suicide prevention is through access to information, resources and training. A prevention focus can be difficult to develop and maintain when one's focus is on crisis or case management, and local leaders need a clear vision of both problems and solutions. Facilitating that leadership development can be done in many ways. One that would benefit a large number of people while supporting inter-community linkages and information sharing would be the development of an annual or biannual prevention-focused conference.

ROLE OF THE MINISTRY FOR CHILDREN AND FAMILIES: It is clear that there is strong potential for Ministry staff to take a leadership role in prevention efforts in local communities. Many already make significant contributions. Yet those who are doing this are often clinical staff with high caseloads, and doing prevention and community development work 'off the sides of their desks'.

Staff within MCF also need access to appropriate tools to help them with their leadership roles. These can include training and resources related to prevention and community development, and other support that could facilitate participation in web-based communications and discourse.

LINKING TO OTHER PREVENTION EFFORTS: The project in Revelstoke clearly demonstrated the potential inherent in having School-Based Prevention Workers involved with systematic suicide prevention activities. Given the clear inter-relationship between high-risk behaviours such as bullying and substance abuse and risk for suicide, an integrated prevention focus that addresses common risk and protective factors is highly recommended.

PROVIDING STRONG LEADERSHIP AND DIRECTION: The people involved in the "Putting Best Practices Into Action" project, as well as others contacted in interviews expressed a clear appreciation for the role that SPIRC has played in championing the development of local suicide prevention efforts across British Columbia. As a provincial facilitator of local prevention efforts, SPIRC has coordinated information development and dissemination, and promoted innovative and cost-effective approaches to suicide prevention using a collaborative and 'distributed responsibility' model. Such an approach is far less costly than some program models used in other provinces, yet it depends on being able to provide a highly interactive and diverse range of supports that can reflect the different needs that individuals, organizations and communities bring to their local development efforts.

EXPERIENTIAL AND INTERACTIVE LEARNING: A consistent theme in follow-up surveys and discussions with those who have been involved with peer helper, generic skill-building and gatekeeper training has been the value of the experiential learning approach used. Information made available and shared is an important resource, but this needs to be supplemented with active skill-building activities. Developing and disseminating resources focused on experiential learning is an important supplement to published and web-based information resources.

FOCUSED RESOURCES FOR COMMUNITIES ACROSS BC: Seed funding is not the only beneficial resource that provincial support could develop. The manual of best practices was hailed by communities as a groundbreaking resource that helped provide a focus for community activities. Other such resources could have substantial community impacts. The Ask-Assess-Act gatekeeper training program was described as accessible and effective by those who had brought it to their communities. The communities that were developing system-wide protocols found it useful to share examples of community referral and post-vention protocols with one another to stimulate discussion and help establish local buy-in and participation by key community partners.

CREATING AN INVENTORY OF BEST PRACTICES: The *"Putting Best Practices into Action"* project has demonstrated that many communities across British Columbia have been involved in diverse and often comprehensive suicide prevention endeavours, many of which have been based on the manual of best practices. Yet examining community level implementations and impacts can speak to broad distal impacts of such programs in only a limited way.

Research is needed that can encompass many communities and community approaches at one time, and allow long-term examination of the impacts of suicide prevention programming on the number of suicides and rates of suicidal behaviours in the province. Once completed, such a project would need to develop a process for monitoring and updating community information on a regular basis to identify long-term trends.

ROLE OF BEST PRACTICES: The manual of best practices has been a powerful and valuable resource to local communities in British Columbia, and not just those involved in the demonstration sites. Most of the manual content will not easily become 'dated', yet some of the resources and examples included in the manual do need to be periodically updated.

MONITORING THE RATES OF SUICIDE & SUICIDAL BEHAVIOURS: There is a marked inconsistency among and within British Columbia communities in how they record and document suicidal behaviours. This is a very difficult area in which to develop consistency, and is unlikely to change without some centralized approach aimed at coordinating broad-based discussions about how and why to measure suicidal behaviours. It is an area in which SPIRC can show leadership and play a facilitating role in establishing consistent approaches to measurement and documentation, and to building a monitoring and surveillance approach that can benefit at-risk youths who could be more easily identified, and research efforts aimed at improving our understanding of what works.

LINKING COMMUNITIES: One of the strongest benefits of the demonstration project was the value that communities placed on the dialogue and assistance they shared with one another. Helping link communities can be an effective and cost-effective way that government can contribute to community development. Most communities now have Internet access that can be used to share information and provide a public forum for discussion.

POINTS FOR CONSIDERATION: PROJECT DEVELOPMENT AND PHASE TWO

DURATION OF PROJECTS AND FUNDING: Without exception, the seven demonstration site communities struggled to complete their prevention project within a one-year time frame. Some activities, such as developing a system-wide protocol, are in themselves difficult to compress into a short period of time — community development demands enough time to ensure that it is inclusive and open to community input. For other activities — even those that can be introduced in a shorter time frame — it usually takes time to be able to fit them into existing planning cycles for key community partners such as the schools.

Development work for curriculum and many of the other suicide prevention activities undertaken by the projects needs a phased approach within the community. Initial implementations are often of limited scope — partners are reluctant to approve a broad implementation of even the most promising programs without piloting them first in a limited setting. Further, development work for new curricula inevitably takes longer than initially anticipated, so a two-year planning approach is not unreasonable for virtually any new implementation.

PROPOSAL DEVELOPMENT CRITERIA — ACCESS TO SCHOOLS: The first round of projects experienced delays and obstacles in trying to gain entry to the schools and school district, even though the school was initially 'on-side' at the proposal development phase. In projects that will involve access to classrooms and students, such as resiliency or peer helping programs, appropriate school representatives need to have a clear and leadership role in the project. School or school district participants should be able to specify how project activities will fit into the school planning cycle, and provide a clear sign-off that key partners are on-board.

PROJECT AND PROPOSAL CONTINUITY: Several projects funded in phase one had their proposals developed by someone different than the people who were involved in the implementation. Sometimes this cannot be helped — staff members of organizations change jobs, committee chairs are subject to change and renewal — yet the loss of the initial vision of a project can be devastating to project start-up and implementation. This situation is further exacerbated when implementation is to be undertaken by a coordinator who is not hired until after the project has been approved for funding. In this context, finding ways to maximize continuity of vision and to enable the project to proceed quickly once approved are extremely important.

SCOPE OF PROJECT ACTIVITIES: While only local communities and committees can determine how many activities they are able to undertake, it is clear that in phase one all of the communities took on more than they could realistically do within the one year. The multiple strategy approach was valuable and made strong contributions to sustainability and actual implementation of key activities, yet the perception among projects and also of those not communities not funded was that SPIRC's expectations for the number of best practice strategies that communities needed to address were unreasonable. The next RFP needs to address this perception, and clarify how a multiple strategy approach might look in implementation. The RFP needs to help ensure that communities are taking on both what they need, and also a scale of project that is doable.

IMPROVED TRAINING SUPPORT: Participants in demonstration projects would

benefit from training related to community development, and an intensive focus on the specific best practice strategies they intend to use in their projects. In the first round of projects there was a gap in the information shared at the workshops and what was communicated to local committees and those involved in implementation. Access to the training needs to be broadened.

NEXT STEPS — BEST PRACTICES: The phase one projects implemented eight of the fifteen best practice strategies. Several of the remaining fifteen have been targeted for the next phase by existing demonstration site communities (family support, school policy, school climate), but the remaining strategies (means restriction, screening, media education, support groups for youth) are all appropriate for inclusion in new endeavours. Proposals from communities emphasizing one or more of these strategies, in conjunction with a multiple strategy approach, should be encouraged.

There remain countless possible approaches to implementing the best practice strategies in new ways. It is important to capture that flexibility and potential in phase two proposals, so it is not recommended that only projects with one or more of the seven remaining best practice strategies be funded. To facilitate communities interested in submitting proposals, share the phase one evaluation report as a means of documenting what has been done, and SPIRC's expectation that next phase projects build on the learning included.

The next phase of best practice strategy implementation should also address more clearly effectiveness issues, by targeting specific implementation models for detailed long-term examination, and possible comparison across several communities. Phase one implementations that will be sustained over time should be examined if possible, with emphasis on charting the prevalence of suicidal behaviours among youth in these communities.

RESEARCH & EVALUATION: The expectation that communities participate extensively in the evaluation work for the overall demonstration project was perceived by most project members as onerous, and contributed to considerable anxiety among project implementation teams. While the evaluation work that was completed was helpful, there were considerable gaps in the information collected, and inconsistencies both within and between projects in how data were collected, processed and shared with the evaluation consultant.

A participatory approach to the evaluation of project activities is still warranted, however it is important to remove some of the research burden and responsibility from sites so that they can concentrate on the implementation. This will require greater up-front involvement by the consultant in projects at start-up, requiring early site visits to clarify project goals and establish data collection approaches and formats. The consultant should take the lead in developing these, with the project sites contributing local expertise in reviewing data collection instruments and strategies, and providing the important leg work involved in administering data collection instruments (such as post-training surveys).

Project reporting remains important, and the expectation that projects submit a final report of their activities should continue. But the nature of that report should change to reflect the changes in expectations in the evaluation and research component of the project. Final project reports should provide detailed descriptions of what activities were implemented in the project, done in a way that would facilitate future replication in other communities. This will involve at a

minimum, copies of resource materials, curriculum and information developed and used as part of the project, as well as a project journal or diary of key implementation decisions and challenges faced over the course of the project. These challenges and lessons learned were one of the most successful aspects of the phase one reporting process.

As part of the phase two evaluation, some resources should be set aside for longer term follow-up of phase one communities, in order to clarify sustainability questions and conduct effectiveness evaluation where possible and feasible.